

**The Volunteer Citizen, Health Services and Agency: The  
Identity Work of Australian and New Zealand Ambulance  
Volunteers**

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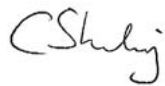
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## **Abstract**

This thesis is an investigation of the interface between service volunteers in Australia and New Zealand and ambulance service organisations using a framework that situates them in a changing cultural and structural environment. This topic is particularly important in a political context where volunteers are viewed as a policy solution to a diversity of social ills, and where recent neoliberal policies and managerial cultural shifts have changed the service environment. Specifically this study focuses on how control and agency are evident within volunteer identity work and how this can inform our understanding of the problems experienced in the integration of volunteers into services. Empirical data was gathered in the form of texts that reflected volunteer identity work at the political level (political speeches of key Australian and New Zealand politicians), the ambulance service management level (ambulance documents and interviews with managers) and ambulance service volunteers (interviews with volunteers and secondary data from open-ended survey questions). A critical discourse analysis (Fairclough 1992, 2003) of the data involved firstly generating broad identity themes from the data. Key texts that strongly reflected identity work were then selected for an in-depth textual analysis.

This study found four key identities for ambulance volunteers in use within ambulance services: the Moral Volunteer, the Professional Volunteer, the Staff Volunteer, and the Self-interested Volunteer. These identities reflected a diverse range of volunteer and managerial interests. Volunteer interests were shown to include material and emotional concerns, at a personal and collective level. However, ambulance volunteers were found to lack collective agency, which led to inequitable treatment within ambulance services. Ambulance volunteers were generally under-resourced and under-managed, and the effects of this flowed to rural populations which consequently received a lower standard of service.

Based on the empirical findings and drawing on governmentality theory (Foucault 1991a) and critical realist theory (Archer 2000; Bhaskar 1975), an explanatory theory of volunteering is constructed. The concepts of identity and agency allow the complexity of the volunteer/service organisation interface in a cultural and

structural context to be incorporated into empirical studies. Service volunteers are conceptualised as collectives of individuals with diverse interests and local level concerns. Implications for practice include understanding how the volunteer/service interface is likely to experience ongoing difficulties without changes to organisational structures and changes to ‘thinking’ about volunteers.

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## Chapter One: Volunteers – expectations and troubles

*“The volunteer movement is at the heart of all our social welfare provision.... The willingness of men and women to give service is one of freedom's greatest safeguards. It ensures that caring remains free from political control. It leaves men and women independent enough to meet needs as they see them, and not only as the state provides .”* (Margaret Thatcher cited in Sheard 1995: 118)

Globalisation, climate change, terrorism, mass migration and displaced persons have made citizenship a key social debate of global concern at the beginning of the 21<sup>st</sup> Century. Theories of identity and citizenship have become pivotal to the sociological debates around these issues and also to the solutions proposed by governments. A key outcome from rethinking citizenship has been a focus on volunteers as a solution to problems as diverse as unemployment, ethnic tensions, and rises in crime.

The promotion of volunteering as both a social and policy objective for western governments has been based on assumptions about a volunteer identity. These assumptions have led to a lack of action in developing suitable systems for involving service volunteers within organisations in a sustainable way. For services such as health, this has led to difficulties with volunteer recruitment and retention. As Margaret Thatcher’s introductory quote suggests policies targeting volunteering are premised on a volunteer identity where volunteers have both the agency, in the sense of having the capacity to act on a collective basis, and the motivation, to provide public goods. This identity draws on explanatory theories of volunteering that fail to account for the broader cultural and structural world that volunteers inhabit. Therefore matters of power and social distribution are poorly accounted for. Greater knowledge about how volunteer agency can remain effective in formal organisational settings is needed to ensure that volunteers can participate effectively in civil society. A theory of volunteering that can explain the multi-faceted influences on volunteer behaviour will provide a firm basis for

developing that knowledge. But further, a theory of volunteering that can take account of the cultural and structural conditions within society will ensure that power relations and the resultant distribution of resources are not neglected when promoting volunteering.

This thesis contributes to volunteering knowledge and the development of an explanatory theory. The study aims to *explore volunteer agency through identity work in health services to inform a theory of volunteering*. This aim is accomplished through a case study of ambulance volunteers in Australia and New Zealand using a critical perspective. Ambulance volunteers provide a suitable study group because Australian and New Zealand ambulance services rely heavily on ambulance volunteers to deliver services in rural and remote areas. As such they have a large volunteer workforce and are experiencing problems in sustaining them.

The first part of this thesis examines the multitude of factors that shape how volunteer identity is commonly understood and that position volunteers in society: political expectations, the body of knowledge on volunteers and volunteering, and the context of rural ambulance services. The research for this study is then detailed, followed by a synthesis where the results are examined in light of existing social theory and a new explanatory theory of volunteering is proposed. This chapter introduces the research problem and the research design.

## **Expectations and troubles for volunteers**

Policy expectations of volunteers are based on a convergence of political discourses and strategies that emerged as western governments moved away from ‘welfare state’ policies in the 1980s and 1990s. Policies promoting volunteering drew on neo-liberal ideas and third-way style communitarian theories (Brown, Kenny, and Turner 2002; Rose 1999; Wilkinson, and Bittman 2002; Wilson 2001). In Australia policy directions emerged within the policy framework of ‘social coalitions’ as a form of new conservatism, where it was anticipated that a triumvirate of government, business, and the non-government sector would more effectively solve social problems (Howard 2000; McClure 2000; McDonald, and Marston 2002: 388; Oppenheimer, and Warburton 2000: 1).

Volunteers were significant in the neo-liberal policies that were enthusiastically applied in the 1980s and 1990s both in Australia and New Zealand (Alford et al. 1994 Boston et al. 1996; Scanlon 2001; Warburton, and Smith 2003). Neoliberalism was characterised by the winding back of government either through privatisation of government services, reduction in government services or competitive contracting out of service delivery (Dean 1999; Hughes 1994: 72; Scanlon 2001: 486). Government aimed to manage and control services rather than directly deliver them, and to emphasise outputs rather than inputs (Alford et al. 1994: 3; Scanlon 2001: 487). The aim was to increase the role of the individual citizen in a competitive economy, thereby allowing a smaller government with less welfare responsibilities through voluntary associations (Beresford 2000: 58; Rose 1999; Wilensky 1975). Government would not deliver services so much as govern through managerialism, where private sector style management became a method for dealing with social and economic ills (Pollitt 1990: 1)<sup>1</sup>. An underlying rationale for the managerialism was that smaller government provided a more flexible and efficient liberal model of government than the welfare state model, and that citizens would compensate for ‘government failure’ by providing services through voluntary association (Weisbrod 1988). The neo-liberal policies therefore aimed to help governments withdraw from some areas of responsibility and to foster the role of active citizens and volunteers to compensate (Ilcan, and Basok 2004; Lacey, and Ilcan 2006: 36; McDonald, and Marston 2002: 384).

The role of volunteers in participatory democracy was another key aspect of new discourses affecting volunteering (Wilkinson, and Bittman 2002). Communitarians in the 1990s increasingly promoted the moderating role of civic society in balancing the market orientation of managerial policies and practices (Stretton, and Orchard 1994: 266). Communitarian thinking influenced many western governments, for instance Tony Blair's Labour Government in Britain in the 1990s introduced a mix of policies commonly known as the ‘Third Way’. Third Way thinking elevated the status of the civic sector to the equivalent of

<sup>1</sup> Pollitt defined managerialism as the belief that ‘better management will prove an effective solvent for a wide range of economic and social ills’.

government and private sectors; this triumvirate was seen as essential in making a balanced and democratic society (Giddens 2001: 7; Hirst 1994).

Volunteers, once mobilised, are expected to benefit democracy by providing a balance to the economic competitiveness and excessive individualism associated with modernisation and earlier neo-liberal policies (Dekker, and van den Broek 1998: 16). John Howard's Australian Government argued that volunteers could provide a more connected and caring type of service than government or market oriented agencies (Costello 2004) and commissioned the *McClure Report* (1999) which clearly established a new focus on responsibilities for all sectors of society. This was underpinned by the Stronger Families and Communities Strategy (FACS 2000) which attempted to strengthen the role of volunteering in the community. An important argument for these policy directions was that a strong civic society was necessary to balance both government and business interests in creating a strong democracy (Oppenheimer 2000: 17; Putnam 1993; Wilkinson, and Bittman 2002).

Volunteers have long been considered a more trusting and socially connected group (Gerard 1985: 237; Smith 1984) and therefore volunteers are expected to provide an avenue for the moral economy of altruism and connectedness to influence governments and markets (Wilkinson, and Bittman 2002). Adam Smith (1984) acknowledged the importance of the moral economy in the 1700s and argued that it was the connectedness of individuals that leads to altruism and the desire to help others. Titmuss (1971) gained interest within policy circles with his argument that altruism would provide both a greater quantity and better quality of public good than that provided on the basis of profit. Communitarian thinking however, influenced the policies and practices of western governments in the 1990s in a context of increasing concerns that the individualism of neo-liberal policies was undermining social cohesion. Communitarians with a renewed interest in collective social activities argued that the neo-liberal focus on competition had "eroded norms of collective restraint and social obligation" (Bell 1997: 263). Other criticisms highlighted the increasing inequality in society (Saunders 1998; Argy 1998) and overall less well being. Even supporters of neoliberal policies began to argue that the government should reintroduce a focus on

collective interest as "human interaction and a sense of belonging and the common good are important" (Keating, and Weller 2001: 96). Collective interests, norms and networks therefore entered the policy dialogues, with re-acknowledgement that "human interaction and a sense of belonging and the common good are important" (Keating, and Weller 2001: 96). In this way volunteers and civil society have come to be considered pivotal in ensuring that a balance of connectedness and altruistic caring remains in modern capitalist societies. Communitarians referred back to Alexis de Tocqueville's classic 1830s study *Democracy in America*, (1953), where he argued that America's democracy was strengthened by the strong associational membership tendencies of its' citizens, thereby establishing the idea of volunteers as powerful social agents.

The transformation of thinking about volunteering in the present early 21<sup>st</sup> Century has influenced policies and practices in a way that has major implications for volunteers (Ilcan, and Basok 2004; Lacey, and Ilcan 2006; Morison 2000). It has increased the role of the non-government sector in dealing with government and market failure, and in theory placed participative citizens on an equal footing with governments and markets for their responsibility in maintaining a caring and democratic society. Central to this thinking is the concept that volunteers have the agency and motivation to address those societal concerns that are placed outside the boundaries of governments and markets. Policy makers have argued that volunteers could and would provide necessary services through acts of altruism, and by implication that they were able to be heard in the policy context.

The case for volunteer agency and voice in service provision may, however, have been overstated. There is evidence that volunteers may *not* be able to provide equitable services outside government and that there are problems for volunteering that have either been exacerbated, or unacknowledged, by the policy agendas of the last two decades. While 'volunteer troubles' will be explored in greater detail in Chapters Two and Three an overview of issues is provided here.

Volunteer activists, claim volunteers have suffered ‘injustice’ (Noble, and Johnston 2001: 152) and researchers suggest that there are problems for volunteers in services (Baldock 1990; Fahey, and Walker 2002)<sup>2</sup>. For example, recent events such as extended bushfires in Australia have raised concerns about the financial costs to volunteers (King, Bellamy, and Donaho-Hunt 2006). There are also difficulties for services when involving volunteers including maintaining adequate numbers of volunteers, maintaining standards, and pressures arising from an increasing ‘managerialism’ (see for example Mocroft, and Thomason 1993; Ohlin 1998; Pusey 2000; Salamon 1987; Volunteering Australia 2006). At a broader level, the issue of voluntary sector failure appears to have been largely overlooked in recent Australian and New Zealand policy drives to contract out services (Ohlin 1998; Salamon 1987) and there is limited understanding of how volunteers themselves are responding to recent government policy initiatives (Brown et al. 2000; Warburton, and Oppenheimer 2000). The lack of exploration of volunteer troubles, in hand with the recent policy expectations of volunteers is likely to threaten the sustainability of volunteer service provision. Ensuring volunteers have a sustainable future in health services provided a key rationale for this study of volunteer agency.

## **The Research Problem and Rationale**

Recent government/citizenship re-conceptualisations and subsequent policy directions have raised expectations about the efficacy and the benefits of volunteer involvement in areas of public service. These expectations however, are based on uncritical assumptions of volunteer agency. Incorporating volunteers into services is troublesome and policy directions do not appear to acknowledge this difficulty. Instead policies and discourses are based on a socially constructed identification of the volunteer as a powerful social agent.

The socially constructed nature of our understanding of volunteers is poorly acknowledged in the literature (see for exceptions Lukka, and Ellis 2001; Tennant 2001). And yet volunteer identity is critical to how volunteers are incorporated

<sup>2</sup> Fahey is the previous surname of the thesis author Christine Stirling

into services, because it is central to broad social expectations about volunteers (Lukka, and Ellis 2001), volunteers interactions with services (Grube, and Piliavin 2000), and the organisational interface where groups negotiate with service processes (Sveningsson, and Alvesson 2003: 1169). Within services, understanding how volunteers negotiate interests, within a changing service environment is critical to the retention and deployment of the volunteer workforce. Therefore studying volunteer identity is an important way of increasing understanding of volunteer agency in services.

Studies of the causal powers of identity on structure and social expectations are recent sociological works (See for example Archer 2000; Rose 1999) and therefore it is no great surprise that little research has considered volunteer identity in this manner to date. This study is situated within this recent sociological movement.

Much previous research has focused on trying to understand volunteers as individuals more than as social constructs. For example, studies have considered the motivations of volunteers and theorised about the nature of altruism (Clary, and Snyder 1991; Clary et al. 1998). These can be considered the ‘internal’ aspects of the volunteer identity, or the inner life, and they are well studied, but little has been done to connect this understanding to the collective identity of volunteers or to the structural world that we live in (Minkoff 2001: 294). This thesis will contribute more broadly to an explanatory framework for volunteers as it takes account of the social and structural world we live in.

Furthermore, few studies have applied a critical perspective to examine the organisational processes necessary for incorporating service volunteers into formal systems (for exceptions see Arai 2000; Baldock 1990; Paull 2002). The volunteer research community, through a 2005 research symposium of some leading European volunteer researchers, has identified the need for critical volunteer studies as one of six volunteer research priorities (Davis Smith 2006). A further recommendation was that greater interest be paid to the processes that occur within organisations employing volunteers. There are even calls within the more frequently researched area of social movement groups, for studies that link a



cultural focus on volunteer identity with studies of the structural elements of organisations (Minkoff 2001: 294). A more interdisciplinary approach is needed that adopts ideas about resources, opportunities and identities in hand with new theories (Minkoff 2001: 294), and this need relates equally to service volunteers. The findings from this study address this acknowledged gap in volunteer research.

The lack of critical service volunteer identity research is regrettable because of the insights such work can generate. An understanding of the interactions at the interface of volunteer identity and service processes can benefit a policy audience interested in harnessing community participation. Service providers such as ambulance services that currently employ volunteers to deliver services will also benefit from such a study as it informs the manner in which they communicate with and manage a volunteer workforce. Finally, volunteers themselves will benefit, as they understand how the manner in which they represent themselves influences the manner in which they are able to negotiate with services. In this way the study findings lead to recommendations that promote modest emancipatory benefits to volunteers who may be suffering injustice, by improving their interactions with management.

This critical study will inform our understanding of volunteer agency at the interface with health service organisations. Using a critical perspective, the focus is on volunteer agency as evidenced in identity work by considering matters such how volunteers negotiate for the allocation of resources and how identity influences the ways service managers govern a volunteer workforce. This focus has power relations as an implicit and underlying interest linked to the need to understand the role of volunteer agency versus control in volunteer identity.

This thesis sets out to contribute both to the theoretical and empirical knowledge base on volunteers. Put succinctly, it aims to *explore volunteer agency through identity work in health services, to inform a theory of volunteering*. In the following section, the conceptual framework of the study is clarified, and then the chapter is completed by briefly outlining the research approach followed to meet the research aim.

## Conceptual Framework

Five key concepts frame this study: volunteering, identity, agency, control and discourse. In this section each concept will be defined and have the theoretical basis clarified. The links between concepts and the purpose of the study will be illustrated.

### Volunteering and Volunteers

Volunteering and volunteers are of central interest to this study. Defining volunteers and volunteering poses difficulties for any study as the diversity of activities and fields of endeavour vary enormously, and the variety of definitions used adds a layer of difficulty when reviewing volunteer research. This study defines volunteering as the *act* of providing unpaid effort to parties to whom the worker owes no contractual familial, or friendship obligation. This follows Tilly and Tilly who define volunteers as those who provide ‘unpaid effort to parties to whom the worker owes no contractual, familial, or friendship obligation’ (Tilly, and Tilly 1998: 32). These definitions move away from some more common and value laden definitions, while still capturing the defining features of volunteer definitions.

Volunteers have played a significant, though often unrecognised health role in Australian and New Zealand society since colonisation. Volunteers are active in service provision and in associational and self-help groups through the nongovernment sector, the government sector or the private sector. In the year 2000, more than a third of Australians volunteered, contributing over 700 million hours of work (Australian Bureau of Statistics 2000: EJ)<sup>3</sup>.

Volunteers work in areas of health and welfare, housing, education, the environment, sport, and the arts (Lyons 2001: 14-15).

<sup>3</sup> New Zealand volunteer statistics are not available due to the lack of a voluntary survey Wilson, C. 2001. “The Changing Face of Social Service Volunteering: a literature review”. Ministry of Social Development.

Limited attention has been paid to health volunteers as a workforce, yet they are important to the health sector. The health sector has many examples of volunteer workers from the acute ambulance services through to palliative care. In the 1999-2000 period there were more volunteers than employees in Australia's community services sector (Australian Institute Health Welfare 2003: EJ); and community services and health services benefited from 29% of the approximately 700 million hours of volunteer activity in 2000 (Australian Bureau of Statistics 2003: EJ). Services have long traditions of volunteer involvement. For instance volunteer ambulance services have been a feature of Australia's health care since the 1800s and volunteers were pivotal in the early provision of hospital care in Australia.

Numerous studies of volunteering inform our knowledge of Australian volunteers, but two national surveys carried out by the Australian Bureau of Statistics (ABS), *Voluntary Work 1995* (Australian Bureau of Statistics 1995 check date) and *Voluntary Work 2000* (Australian Bureau of Statistics 2000) provide the best statistical overview. In 2000, from a sample of 12,900 people, 32% claimed to have "willingly given unpaid help in the form of time, service or skills, through an organisation or group" (Australian Bureau of Statistics 2000). The study showed that Australian volunteers numbered nearly 4.5 million.

Volunteering functions can be divided into four main roles: service to others (which is the focus of this study); mutual aid or self-help; participation; and advocacy/campaigning (Ohlin 1998). These functions are not mutually exclusive and a service delivery group may also be a self-help group. Fund raising is the most common activity undertaken by ABS measured volunteers (56%), followed by management, teaching and administrative type work (Australian Bureau of Statistics 2000: EJ). While most health service volunteers undertake support roles (Australian Institute Health Welfare 2003), others such as ambulance volunteers often have a full service delivery role.

Comparisons of the 1995 and 2000 national surveys by ABS showed an increase in the participation rate of volunteers from 24% in 1995 to 32% in 2000 (Australian Bureau of Statistics 1995, 2000). This significant increasing trend is at odds with commonly perceived problems with volunteering numbers. Some

suggest this is because volunteering is increasing, but is changing form and therefore may actually be declining within more traditional volunteer involving organisations such as ambulance (Warburton, and Mutch 2000). The greater than 18 per cent decrease in volunteering for government community services over the same five year period of 1995 to 2000 offers some support to these ideas (ABS Community Services 2001: EJ). The mean donation of volunteer time of 1.5 hours per week also suggests that the level of commitment may be the problem for traditional volunteer involving services. The increasing movement of women into the workforce, and modern western life in general is often argued to be the cause of time poor volunteers (Pusey 2000; Zappala, Parker, and Green 2001).

Common definitions of volunteers are strongly linked to our taken-for granted assumptions of volunteers. Most commonly, the term volunteer is used in relation to an individual who contributes unpaid time under the umbrella of an organisation. Formal volunteers (those donating time to organisations) are usually the subjects of empirical studies of volunteering and most volunteering statistics are based on this group. An individual who chooses to provide unpaid work to an organisation to help a stranger is the most commonly understood definition of a volunteer in the United States (US) (Cnaan, Handy, and Wadsworth 1996) and likely to be in Australia as well.

Use of the commonly understood definition of a volunteer can have associated problems. The dominant definition may exist largely because labelling volunteer activity initially only needed to be applied to those operating within an organisational setting, and because when attempting to count volunteers, organisations provided a natural boundary for economists and statisticians.

Other elements are increasingly being added to or debated about volunteer definitions. For example, Volunteering Australia developed the following volunteering definition:

"Formal volunteering is an activity that takes place in not for profit organisations or projects and is of benefit to the community and undertaken of the volunteer's own free will and

without coercion; for no financial payment; and in designated volunteer positions only."(Cordingley 2000: 73).

By specifying not for profit, no coercion, and designated volunteer positions, Volunteering Australia aimed to gain clear differentiation between volunteers and other forms of unpaid work such as carers, work experience, work for the dole, unpaid work in the home, and community service orders. This approach was aimed at lessening several perceived threats: volunteering being used to exploit volunteers for financial gain; volunteers replacing paid workers; and a weakening of the sector by not having agreements between government, unions, business and the community (Cordingley 2000: 80). This prescriptive definitional approach to deal with perceived threats highlights the impact that naming and classifying can have in forming identity.

Whether to differentiate between volunteers operating within formal organisations, so called ‘formal volunteers’, from those outside formal organisations, called ‘informal volunteers’ is a further definitional nuance. A criticism of the formal volunteer definition is that it excludes many people who contribute to society through family care, neighbourly acts, and community participation. Recent studies have highlighted the large amount of helping activity that is carried on outside the boundaries of formal organisations (Fisher, Patulny, and Bittman 2004: 33; Ironmonger 2000; Kerr, and Tedmanson 2003: 25-26). Studies that use a less formal definition show greater rates of volunteering, higher diversity of volunteers, and greater societal contributions (Fisher et al. 2004; Ironmonger 2000: 59). It is therefore argued that formal definitions hide the workloads and contributions to our society of certain groups, such as women (Ironmonger 2000: 69) and indigenous groups (Kerr, and Tedmanson 2003: 26).

While informal volunteering is not within the scope of this study, the definitional debates highlight both the shifting and socially constructed nature of volunteer identity. Current debates suggest that definitions of volunteers are not static but are continuously being renegotiated, and consequently are not clearly bounded (Tennant 2001: 157). As an example, there is blurring of boundaries between volunteering and other forms of community participation. Sheard, reflecting on a

media report about community carers stated "...the confusion is all too obvious: 'volunteers' equals 'carers' equals 'the voluntary sector' (1995: 114). The meanings associated with volunteer identity are changing with historical, social and cultural conditions and therefore a study of volunteer identity needs to be placed within the historical socio-cultural context and deal with changing identities.

Equally definitional variations highlight how volunteer identity can be manipulated and contested. Critics of the formal volunteer definitions used by most studies have good reason to challenge this traditional approach, as it is clear that different definitions affect the collection of data and impact on our understanding of volunteers. The ABS *Voluntary Work Surveys* (1995; 2000), for instance, exclude time contributions for training and on-call, which form a large and essential part of the work undertaken by emergency volunteers such as ambulance volunteers. The ability of data collections to perpetuate ideas about volunteers are subtle forms of power that become embedded into identity processes (Foucault 1991a). Therefore it needs to be understood that our 'common understanding' of volunteers is neither natural nor inherently true, but instead directly linked to the ways that volunteers are classified and thought about.

For critical realists such cultural properties as definitions are considered real entities because they have causal powers (Archer 1995, 2000; Willmott 2000). Once knowledge such as a definition of volunteers is produced, it becomes a object that can continue to exist outside human agency (Willmott 2000: 77). It is therefore important to consider the role of cultural properties on volunteers' collective identities (Minkoff 2001: 294).

This research contributes to understanding how cultural realities such as classifications interplay with human agency to construct the volunteer identity. Following Foucault (Burchall, Gordon, and Miller 1991; Foucault 1991a, 1991b) and Archer (Archer 1995, 2000; Willmott 2000), classification will be understood as part of the cultural power relations that affect volunteers. These matters will be returned to later in this section as the interpretation of the concepts of identity and power as used in this study are further explained.

## Identity

There are three key elements likely to be implicated in the identity work at the interface between volunteers and services; that is the type of identity work under study, volunteers as agents in identity work; and the efforts of other groups to control such as managers. The work of both Archer (Archer 1995, 2000) and Foucault (Foucault 1972, 1988a, 1991a, 1991b) provide useful insights into these three factors within this study.

The concept of identity has evolved from two strands of thinking which tend to either argue for either too much influence from society, or conversely, too little (Archer 2000: 284). Recent trends move away from polarised approaches to the study of identity and attempt to incorporate both society and self (Benwell, and Stokoe 2006), which is where this study is situated. Identity is therefore taken herein to be ‘an actively constituted, performed discursive achievement’ (Benwell, and Stokoe 2006: 34) and as ‘fluid, fragmentary, [and] contingent’ (Benwell, and Stokoe 2006: 17). This situates *identity as work* (Sveningsson, and Alvesson 2003: 1165), with volunteers as social actors, actively constituting and using identities within a localised context, but constrained by the socially constructed identity choices available to them. The choices themselves result from the cultural and structural world of the individual. Identity work ensures that volunteers’ identities are versatile and shifting to meet changing socio-cultural circumstances (Benwell, and Stokoe 2006: 32-33).

Early approaches to identity viewed it as a fixed and internal element of the individual. Identity was described as an internal conception of self that was based on agency and reflexion; personal identity (Benwell, and Stokoe 2006: 18-20). Postmodern thinking then increased awareness of how rational, but socially constrained agents work to link identity with the personal self (Giddens 1991). Sociologists located identity within the social, and conceptualised it primarily as identification with a group; collective identity. Psychological studies focused on the processes of membership and categorisation (Tajfel 1982; Tajfel, and Turner 1986). Until post-structuralist influences however, identity was still treated as an

essentialist and pre-discursive phenomena, some natural element inside us all that drives behaviour.

Following Foucault (Foucault 1972, 1988b, 1991a, 1991b), understanding about the power of knowledge production and truth, undermined the essentialist ideas of identity. Now identity could be understood as socially formed, and in turn a form of government (Foucault 1991b). Governmentalists conceptualised identity as a form of control, used to govern the population through self-government of the subject (Dean 1999; Foucault 1991b; Rose 1999). This control is largely believed to occur through discourses that establish what is true and known within any given society. This 'discursive production of the subject' (Foucault 1972) opened the way for accounts of dominance and resistance, ideology and hegemony to link with identity studies.

While Foucault appeared to reject the notion of agency in his earlier work (Foucault 1972), his later work (Foucault 1981) gave 'the subject a certain reflexive awareness of his or her own conduct' (Hall 2001a: 79). This later movement of Foucault's towards viewing the subject as having some agency and ability to be influenced by ethics or self-knowledge enabled this study to adopt Archer's views on agency and identity, in hand with Foucault's ideas of identity construction. This fits with calls to increase interdisciplinary studies that blend concepts from different disciplines (Fairclough 2003: 225; Minkoff 2001: 294). Research that blends concepts can therefore put agency and structure back into identity theory (Fairclough 2003; Minkoff 2001).

Research that incorporates all these concepts must avoid conflating them. Archer's work (2000) is underpinned by critical realism, which stresses that while culture, structure and agency are mutually influential they must be analysed separately (See also Bhaskar 1975; Easton 2000; Willmott 2000). Therefore volunteer identity will be studied for aspects of both agency and control to capture a balanced picture of identity work in a cultural and structural real world.



## Identity and Agency

A collective volunteer identity involves recognising oneself as belonging to various groups and not others, and seeing the world from these perspectives; this is the work of social agents. Social agents require a level of reflexivity to take up an identity where matters such as morals and emotions form part of an 'inner conversation' that helps us develop a personal identity (Archer 2000: 10). Identity can be studied at three distinct levels, personal identity, social identity and collective identity (Klandermans 2000: 163). The collective identity work of volunteers is central to this study and is the '*shared definitions of a group that derives from members' common interests and solidarity*' and outlasts the individuals membership (Taylor and Whittier 1992 cited in Klandermans 2000: 163) Collective identities can be considered as cultural entities with causal properties of their own. Social identity on the other hand is the individuals' '*selfconcept that derives from his knowledge of his membership of a social group*', which is in effect the point of interplay between agency and culture (Tajfel 1978: 63). Personal identity on the other hand, is *the individuals' self-concept that derives from interaction with both cultural and structural elements of the real world* (Archer 2000). While social and personal identity are not the focus of this study they are of peripheral importance because they are points of interplay between agents and the real world and therefore contribute to the identification by volunteers of their interests and to the reasons for selecting a particular volunteer identity. Reasons for taking up a volunteer identity are well studied under the concept of motivation, and while personal identity is not itself a focus of this study, the links between motivations and collective identity cannot be ignored as they are likely to be important in understanding how volunteers interface with services.

Archer's theory (2000) posits an emergent development of identity, where firstly society impinges on the developing self through life chances, which are the stratified cultural and structural situations that we all find ourselves in at birth. These life chances influence the developing self and the choices made in terms of social identity while also constraining the choices agents are able to make in taking up collective identities. The individual agents as part of social collectives

(and identities), also influence the social identities they take-on, as they position themselves to meet changing cultural and structural conditions or to actively change existing but unsatisfactory life chances. This collective action if strong enough, which Archer calls Corporate Agency, can then permanently change or transform the collective identities, (Archer 2000: 260). That is groups of volunteers can work through collective identity to effect change to deal with changing cultural and structural circumstances, which also can permanently change volunteer identities. These shifts bring together a more comprehensive view of identity that tries to avoid theoretical polarisation. Archer's 'stratified social subject' (Archer 2000: 259) proved useful for this study of volunteers because it allows a balance of the theoretical influences of self and society on identity and the linkages between agency, culture and structure. Archer's critical realist approach and theorising on identity therefore formed a central aspect of the conceptual framework for this thesis. The underpinning methodology is explained in detail in Chapter Four.

Volunteers choose to volunteer, and then work within a characterisation of a volunteer identity. People choose from multiple identities and then work to position themselves within those identities by acting within certain parameters or expressing certain characteristics (Fairclough 1992: 64-65). People do this because they are social agents who have interests which they partly meet through social identities (Archer 2000: 284-285). '...as Social Agents, groups and collectivities of people confront problems which are interest-related...[they] confront problem-ridden situations in relation to these wider interests (which are rooted in their life chances)' (Archer 2000: 286). Such collective interest-related behaviour is easily recognised in the work of activist volunteers, but less visible in the work of service volunteers.

For health service volunteers, their collective power will be important in how they can influence their own interests and to the extent that they are able to affect changes to the volunteer identity. Interests in this study are understood partly as the 'vested interests' that are inherent in any situation of finite resources, where groups and individuals must struggle for a share of the resource distribution (Archer 1995: 203-204). But further, interests include those more emotional needs

and commitments of individuals and groups that can lead them to reorder or displace priorities (Archer 2000: 200).

The struggles that occur over interests through identity also contribute to changes in collective identities. They cause a 're-grouping' of characteristics (cultural elements) and roles (structural elements), through a process that Archer calls 'morphogenesis' (Archer 2000: 273-276). Morphogenesis is a remodelling of cultural and/or structural elements of society brought about by powerful groups (Corporate Agents), but able to be affected by less powerful groups. Those with less power still influence morphogenesis because 'collectivities without a say, but similarly situated, still react and respond to their context as part and parcel of living within it' (Archer 2000: 266). In this way service volunteer identities are central to the processes of change and power involving interplay between agency, culture and structure.

### **Identity and Control**

The other aspect of power in identity work is control. Other powerful groups in health services may dominate or challenge efforts by volunteers to meet their interests. By studying the role of volunteer identity in meeting interests, any struggles by dominant groups to maintain power can be exposed (Archer 2000: 287). This returns us to the issue of control over volunteer identity work.

To understand how dominant groups use volunteer identity requires an understanding of the ways that identity is used to exert control. Foucault's insights (Foucault 1972; 1991a, 1991b) helped to focus this study on the processes that are used by powerful groups to control and manage others through identity. The previous discussion on volunteer definitions highlighted the potential influence of categorization on volunteer identity. When a definition influences the data collections that form the basis of knowledge production, the 'volunteer' can in part be a construction of this knowledge. Identity can therefore be a form of control because of the power of others to establish and define the cultural elements of volunteer identity, the characteristics and expectations of service volunteers.

The effects of categorization are one aspect of government in the Foucauldian sense. Foucault famously defined government as the 'conduct of conduct' (Foucault 1982: 220-221). In this sense government relates to deliberate attempts to shape behaviour for various ends according to social norms. Dean (1999) expands on Foucault's concept:

*Government is any more or less calculated and rational activity, undertaken by a multiplicity of authorities and agencies, employing a variety of techniques and forms of knowledge, that seeks to shape conduct by working through our desires, aspirations, interests and beliefs, for definite but shifting ends and with a diverse set of relatively unpredictable consequences, effects and outcomes.* (Dean 1999: 11)

Government is therefore the activities that attempt to shape the behaviour of volunteers and may be undertaken by policy makers, managers, administrators or others.

Research studies on forms of governing, prior to post-structuralist influences, commonly focused on the role of the 'state', and power as forms of dominance and coercion (Dahl 1957; Weber 1978; Young 1990). While Foucault did not deny that power can be expressed as force, prohibition, threats, and punishment he argued that modern governments relied on a *knowledge/power* mutuality to govern (Foucault 1980). Because there are many forms of power in modern societies such as legal, administrative and consumer power, modern governments depend on both scientific and moral knowledge production to establish what is accepted as true within a society (McHoul, and Grace 1993: 65; Rose 1999: 18). When such truth becomes taken-for-granted the control elements become unquestioned and hidden.

Establishing truth facilitates control of the behaviour of individuals and the population as it establishes social norms and historical, social, and cultural contexts. Identity formation is one such method of control (Rose 1999: 23-24). The ways in which classification and representation can form identity and be mechanisms of control were famously demonstrated by Edward Said (1978). He showed how Europeans produced the idea of the 'Orient' as a new object of

knowledge, not as a reflection of the real place, and that this had significant implications for how 'Orientals' were treated and governed. In this way those with the 'power to mark, assign and classify' others can contain them within a certain field or can produce a new object for management (Hall 2001b: 338).

The governing of volunteers is therefore closely linked to the ability to identify and describe them (Rose 1990: 5). Identity becomes a form of control once society accepts common volunteer characteristics as taken for granted knowledge. The identities become real cultural entities. The identity expectations then create constraints for those taking up volunteer identities. For example, ambulance volunteers are expected to maintain patient confidentiality. This is a socially constructed expectation of the ambulance volunteer identity that affect the volunteer's capacity to talk about their ambulance work and that requires the volunteer to monitor their own behavior to maintain an established moral norm. At a more micro level managers are able to influence ambulance volunteer behaviour through control of classification procedures.

In summary, volunteer identity work will show elements of agency and control. Archer (2000) contributes to understanding how agency interacts with the work of identity and the socio-cultural context of change through:

- reflexive volunteer agents,
- collectivities of ambulance volunteers working to meet interests, and
- morphogenesis where social and cultural change require a re-grouping of identities which themselves change.

Foucault and others (Burchall et al. 1991; Dean 1999; Foucault 1981, 1988a, 1991b) shed light on methods of identity control by groups more powerful than volunteers such as managers. Volunteer categorisation and representation are key examples of the processes of identity formation involved in the governance of identity. Identity work can therefore be linked to the material and social interests of volunteers and others operating at the interface of services, while not ignoring

that identity work also links strongly to the reflexive individuals who may gain or be diminished in terms of personal identity when they become volunteers.

Volunteer identity and identity work are also central to issues of change. Identities are learnt, adaptive and functional and therefore in times of change, such as are being experienced by many service volunteers, identities become destabilised and are re-negotiated, repaired, or strengthened to deal with transitions (Sveningsson, and Alvesson 2003). The re-negotiation and repair of identity attempts to deal with the influences of broad cultural and structural contexts and individual agency within constraining environments. Much of this identity work occurs in discourse.

### **Identity and Discourse**

As the previous section identified, volunteer identity work is a form of social action with inherent power struggles and discourse is central to the meaning-making and interactions involved. This section outlines key discursive practices that are used to perform identity work. The term discourse is used throughout this study. It is used in the way that Foucault established (1972: 80) to include a domain or ‘order’ of statements, as well as to refer to the social rules and conditions that allow discourses to be developed and reiterated.

Identity work occurs largely through discourse. Discourse and identity are linked because of the central role of discourse in knowledge production and interaction (Willmott 2000: 82). Mills explains this clearly:

“...discourses are not anonymous sets of writing which have little effect on people’s lives, but they actively constitute us as subjects; individuals have some part to play in this process, both challenging and rewriting some of the positions within discourse.”

(1991: 68)

The contribution of discourse to volunteer identity is important because “socially sustained discourses about who it is possible or appropriate or valuable to be inevitably shape the way we look at and constitute ourselves, with varying degrees of agonism and tension” (Calhoun 1995: 213). It is likely for example,

that discourses that treat volunteers as a valuable part of health services generate personal self-esteem benefits for volunteers.

Discourse contributes dialectically both to the reproduction of identities and to changes of identities (Fairclough, and Wodak 1997: 55). For this study of volunteer identity work it is necessary to describe how discourse is used to construct and change volunteer identities, and how identity is used to perform social action through discourse. The idea of dialogic change fits well with Archer's (2000) critical realist views of human agency and collectivities, and Foucault's (1972; 1988a; 1988b; 1991b) ideas of governmentality. By drawing on historical discourses, and practices of classification, representation and positioning, volunteer identities will change over time.

Any discourse draws on a history of discourse and a collective way of representing knowledge (Foucault 1972; Maybin 2001). Language is always responding to what has already been said, that is, it is dialogical. Discourse links individuals and societies through a historical, "dynamic, interactive spiral of change' (Mercer 2000: 10). Volunteer identities therefore will always contain traces of history within them and changes to identities will be responding to the existing identities.

Identifying difference and those who are 'other' to ourselves is considered to play an important role in the constitution of self at both a psychological, cultural and social level (Hall 2001b: 328-332). It is only through a dialogic struggle over difference that we can create meaning, and that it is through discourses that meaning is modified and negotiated (Hall 2001b: 329). The ideas of difference and 'othering' link directly to classification practices, which have already been highlighted as an important method of identity construction. Classification practices can be understood as a mechanism for classifying individuals into subjects, and 'binary oppositions' are central to the ways we classify (Hall 2001b: 329). Foucault in *The Order of Things* (1994) asserted that modern knowledge production had classified individuals into dualistic types of subjects such as volunteer or non-volunteer. There is however, rarely a neutral binary and most

identity binary classifications carry an implied good/bad, or powerful/weak divide, for example sane/mad, or volunteer/non-volunteer (Hall 2001b: 329).

Collective identities construct and use commonly understood classifications, but as the volunteer definitional debate highlighted, these are open to challenge. Dominant public representations of volunteers can therefore be studied to understand whose interests are served by the representations. Understanding representation means considering how volunteers are made visible or invisible through discursive imagery, labelling, or visuals which can result in positive or negative stereotyping or even myths (Hall 2001b). Representations create meaning by highlighting only a limited number of aspects of identity which will directly link to underlying ideologies.

Power is inherent in representations as well. Representations linked to institutions have been shown to predominate over others, which suggests that volunteers' local knowledge representations will not dominate those of other service staff (Mehan 2001 361). This power imbalance can be found for example, 'when a voice speaking in formalized, rationalistic, and positivistic terms confronts a voice grounded in personal, common sense or localized particulars, the technical prevails over the vernacular' (Mehan 2001: 361). So it is likely that the voices of local volunteers are not heard over more institutionally based groups.

So if volunteers are represented in a certain way often and powerfully enough, then this becomes incorporated into their collective identity. In this way ideologies as representations can be 'inculcated' into the identities of social agents" (Fairclough 2003: 9). Metaphor and vocabulary selection are two linguistic methods available for representing identity (Benwell, and Stokoe 2006: 116). By studying representations in discourse we gain insight into the collective power of volunteer groups and the power of others at the service interface.

Classification and representation can construct and change identities, but positioning is the way in which volunteers take-up, or are allocated, these identities. Positions could be described as a space within discourse that individuals must occupy if they wish to subject themselves to an identity



(Wetherall, Taylor, and Yates 2001: 23-24). Speaker position themselves within a certain stream of social thinking, or ideology by the manner in which they speak or position themselves within discourse. Positioning involves applying a perspective which is 'the standpoint from which a person is participating in discourse' and from which the speaker identifies themselves with certain groups, certain politics and certain strata of society (Mehan 2001: 361). Modality is one important aspect of discourse where speakers or authors position themselves by expressing judgements (Benwell, and Stokoe 2006: 112). An example of the importance of modality could be whether a person identifies as an ambulance volunteer through the word 'we, or as a non-volunteer through using the word 'they'. Modality is one element of discourse involved in the work of volunteer identity and the positioning that an author or speaker can take.

This section has highlighted how identity work involves drawing on historical discourses, and processes of classification, representation, and positioning within discourse. Identity work can be achieved through discourse by methods such as the selection of vocabularies, genres, and grammatical style. Studying the linguistic choices made can highlight issues of power and the evaluative nature of what is said. Identity discourses can have real effects on ambulance volunteers when they negotiate at the interface with ambulance services.

This study examines more closely the identity work of characterisation, representation and positioning of ambulance volunteers in order to understand the interactions that occur at the interface with ambulance services. Examining the way volunteer identity is both constructed and used in discourse will assist in understanding the negotiations and conflicts that occur over interests, and the way that identity creates effects on real health services and organisational systems.

### ***Research Approach***

The study aims to *explore volunteer agency through identity work in health services to inform a theory of volunteering*. This research is interdisciplinary and sets volunteer identity work within a cultural and structural context. The conceptual framework places this study within a critical realist perspective (Archer 1995, 2000; Bhaskar 1975; Fairclough 1992, 2003) that examines the

interplay between structure and agency. Ambulance services were selected as a case study because they employ a large and essential volunteer workforce and have experienced 'volunteer troubles' (Fahey, and Walker 2002).

The conceptual framework highlighted the role of agency and control in identity work and how discourse is an important site of this identity work. This conceptual framework provided the basis for the questions guiding this research:

- What are the key collective identities that apply to Australian and New Zealand ambulance volunteers and what are their key features?
- What evidence of volunteer agency emerges from volunteer identity work within Australian and New Zealand ambulance services?
- How does the cultural and structural context affect volunteer agency in rural Australia and New Zealand?
- How does volunteer identity work within Australian and New Zealand ambulance services inform a theory of volunteering?

The research design is based on a case study of texts that contain ambulance volunteer identity work. The study of texts provided empirical level data on the identity work of characterisation, representation and positioning at the ambulance volunteer/service interface.

Four key sources of data were used to explore volunteer identity work from several points of influences. Ambulance volunteers, ambulance service managers, and policy makers were identified as the key groups likely to be involved in characterizing, representing and positioning ambulance volunteers. In addition survey comments, interviews, public documents and public speeches provided different stages in the development of discourse and texts where control can influence identity work. The four data sources that combined these elements were:

- Data that provided a broad policy-level characterisation, representation and positioning of volunteer identities were drawn from the public speeches of key politicians.
- Data that accessed the way that individual volunteers characterize, represent and position themselves to address their issues drew on a secondary analysis of 702 open-ended survey comments<sup>4</sup>.
- Data that showed how volunteers are visibly characterized, represented and positioned in ambulance organisations were drawn from documents from several Australian ambulance organisations.
- Data that provided a close look at ‘how’ the characterisation, representation and positioning of volunteer identities is used in governance at a local level were accessed through interviews with fourteen key management staff and management level volunteers from an Australian ambulance organisation, and by examining organisational documents.

The researchers’ knowledge of the field, through involvement in an antecedent study (the SUBC study which will be discussed in detail later) and the relevant key players in ambulance services were important considerations that underlay the data selection (Fairclough 1992: 227).

Data analysis drew on Fairclough’s (1992; 2003) version of Critical Discourse Analysis (CDA), and followed a strategy of initially looking for broad patterns of identity features within the texts, then undertaking further text selection to allow in-depth text analysis. Text pieces were selected for in-depth analysis if they clearly demonstrated identity work or key matters of change and volunteer interests. Evidence of volunteer agency at the interface with ambulance services

<sup>4</sup>Survey quotes were drawn from Australian and New Zealand volunteer ambulance officer survey respondents, collected for an earlier project *Stand Up and Be Counted* study Fahey, C. and J. Walker. 2002. “Emergency Services in Australia and New Zealand: problems and prospects for volunteer ambulance officers”. pp. 1- 70. Hobart: University of Tasmania.

was uncovered through studying the classification, representation and positioning practices within ambulance volunteer identity work. These practices were linked to the practices and experiences of volunteers at the service interface. Data analysis was supported through the use of the NVivo computer software (QSR International Pty Ltd 2002).

On the basis of analysis of the data the thesis contributes to a critical theory of volunteering, showing the utility of the concepts of identity and interest in developing sociological understanding of the volunteer/service interface. The thesis identifies four volunteer ambulance identities in use in ambulance organisations and moves from a micro level analysis of identity work to a broader level of theorising on volunteer agency and identity.

## **Thesis structure**

Based on the primary and secondary empirical data on how ambulance volunteer identities are used at the volunteer/service interface, the study sheds light on service volunteer agency.

The following chapter reviews relevant literature on volunteers to understand how key academic discourses have contributed to our commonly held understandings of volunteer identity. It sets volunteer identity in the context of ongoing social and political change and highlights a lack both of a critical focus on volunteering and of volunteer identity studies. Chapter Three introduces the ambulance case including the historical, social and cultural context of ambulance services, moving from broad policy expectations, to the ambulance service context and the focused issue of ambulance volunteer troubles. Chapter Four provides details and justification for the research approach used and further explanation of the critical realist ontology. Chapters Five and Six present the findings of the analysis of ambulance volunteer identity work. Characteristics of four key ambulance volunteer identities are described and the role of historical discourses, categorisation, representation, and positioning in identity discourses are highlighted. The manner in which the volunteer identities are operationalised at the interface between ambulance services and volunteers is considered. Chapter Seven discusses the study findings and develops an explanatory theory of the

volunteer/service interface. Chapter Eight is the conclusion and will highlight how the research aim was met and the broader implications of the study findings for policy makers, managers and researchers.

## **Conclusion**

The current expectations of volunteer participation in service provision will ultimately be counter-productive to the interests of both government and volunteers unless there is increased knowledge about how to effectively incorporate volunteers into health service environments. Troubles at the volunteer/service interface deserve attention, particularly in light of current expectations of volunteers in policy and other circles. Volunteer identity work is central to concerns such as these and provides a useful focus for this study that looks to understand the interface between volunteers and services. An approach to identity work that incorporates the effects of both agency and control in identity work requires consideration of broad historical, social and cultural factors as well as closer context relevant information. The next chapter will consider how the body of volunteer focused literature has largely failed to address the concerns of this study in a contextualised manner.

## Chapter Two – The Framing of Volunteers

*...assembling volunteers as responsible citizens in the delivery of public services has enormous implications for: the long-term viability of those services, given the donated nature of voluntary labor; the quality of services, given the precarious nature of voluntary labor supply, and; for the relationship between volunteers and local communities, given the potential for agenda-setting by either the volunteers themselves or the NGOs that act as overseers. (Lacey, and Ilcan 2006: 47)*

The idea that volunteers are a solution to society's ills underpins much of the recent interest in volunteering which as Lacey and Ilcan's quote suggests can have far-reaching effects. In the chapter the influences from the theoretical and empirical literature on volunteer identity are presented. Questions were raised in the previous chapter about whether volunteers have the agency to meet the expectations of volunteers that recent neo-liberal and communitarian theories have raised. A closer examination of the literature shows there is little empirical basis for these expectations and few works examining how the processes of volunteers' active citizenship deliver better services. Therefore this review of the literature shows the need for research to explore volunteer agency at the volunteer/service interface by demonstrating both the assumptions and gaps in research on this topic. Furthermore, the results of the review of the literature support the use of a critical perspective in this study by identifying the lack of diversity in approaches to volunteering research, in particular critical perspectives.

Literature was sought on volunteering, volunteers, the voluntary sector, citizenship and policy. The review covers the macro topics of political and social level explanations of volunteering and power, social capital, and the micro level literature on explanations of volunteering and experiences. Selection of material for inclusion in this chapter was based on identifying seminal works and key theories, therefore providing a review that is necessarily broad. Seminal works are discussed in detail and historical developments over time noted. On the topics of volunteer identity and volunteer agency, there was less literature and all sourced materials were reviewed. Disconfirming evidence was sought and no study was omitted on the basis that it did not fit with the central argument of this thesis.

The identity of volunteer as citizen is firstly examined. Citizenship theories are reviewed to clarify how they explain volunteers' ability and desire to deliver social services. Evidence of government/volunteer relations is then reviewed which shows that governments clearly influence volunteer activity through policy and funding. Following this section is a review of the literature that positions volunteers as social agents. This literature has a more micro level focus on the processes of volunteer involvement in services and the key concepts of motivation, prosocial behaviour and social networks are pivotal. These concepts underpin the majority of the explanatory volunteer literature which largely follows a single disciplinary focus on psychology, sociology or economics. While much of this literature is singularly focused, the trend towards a more complex, interdisciplinary literature in sociology is reflected in some recent literature on volunteers, providing support for the interdisciplinary approach taken in this study. Finally, the literature that positions volunteers within a workforce frame is examined.

Two fundamental deficiencies in the literature are highlighted. Firstly, there is little critical analysis of volunteering. The literature focuses strongly on the volunteer as an individual or as part of a group, but provides very little social level analysis of power and class. This hides the complexity of the relationship between volunteering and social changes, and leads to governance at both the political and organisational level that is based on simplistic assumptions. The second key deficiency in the literature is the lack of identification of the volunteer as a part of the workforce, despite the recent political trends that desire exactly this. The lack of a workforce framework to theorise and study volunteers has also impacted on the understandings about how volunteers interface with services. Pressures for increased NGO accountability have seen an increased focus on the management of volunteers, which is largely found to be 'underdone' in terms of time and resources. Moves towards increasing management of volunteers incorporate styles used for paid employees. Early research into this area suggests that this may not suit volunteers and that the area requires further study.

## ***The volunteer as citizen***

What follows is an outline of how political theories of citizenship have influenced understandings of volunteers. Of particular interest is how these theories have either overtly or by implication represented volunteers as powerful, and what, if any, is the evidence for the assumptions and expectations bounding volunteers.

Conceiving of volunteers as a solution to social ills is not a new feature of government policies. For example, in the 1960s it was felt that the voluntary sector could usefully engage societies' troubled youth, and in the 1970s British governments were publicly asking volunteers to help curb trade union power by strike breaking (Sheard 1995: 116-117). By the 1990s volunteers were elevated to political visibility through neo-liberal ideas of community care, and communitarian concerns with active citizenship. Overall, volunteers have received increased theoretical and political attention over the last two decades because of beliefs that they can generate social cohesion and can provide welfare services (Giddens 1998; Keating, and Weller 2001; Putnam 2000).

### **Underpinning assumptions of volunteer' citizens**

Underpinning the political interest in volunteers are assumptions about the agency and virtue of volunteers as citizens in the sense that volunteers are believed to have the power to deliver effective services and/or the virtue to prioritise a collective good over personal interests. In the first instance such citizens are considered to be 'rational', and in the second 'active'.

Both rational and active citizens have become a policy objective in many western countries in the guise of a 'paradigmatic shift from welfarism to economic rationality' (Morison 2000: 102). The welfare state approach had focused on providing an equality of social outcomes for citizens to maintain a cohesive and stable society through government programs such as unemployment relief, public schooling, public works, and public health (Dean 1999: 150; Stretton, and Orchard 1994: 233). However, neo-liberal critics of welfare state policies argued they were undermining the ability of civil society to deal with problems and causing an excessive reliance on an unwieldy and costly government sector (Emy,



and Hughes 1991; Friedman, and Friedman 1980; Hayek 1960; Saunders 1993). Capitalism and markets were argued to be better placed to develop social cohesion and associationalism because they allow citizens to operate in an environment of autonomy and security but reward civilized values (Hindess 2002: 135; Saunders 1993 86). It is volunteers in associational groups who are expected to maintain a strong civil society in a capitalist society.

These liberal views of volunteers are underpinned by individualism based on economist theories of the rational person, who always makes decisions based on best outcomes for personal interests which then drive the basic laws of supply and demand (Bell 1997: 124). The focus on individualism assumes people have set wants, interests and purposes that are independent of social and cultural contexts (Lukes 1973). Even though people associate within the market only to meet their own interests under this theory, the plurality of interests balances out an excessive focus on any one interest (Hindess 2002: 135; Saunders 1993: 86). Voluntary agreements between individuals are believed to provide social direction as long as people can exist in a free and safe environment. In short, neo-liberals argued that individualism and a focus on equality of opportunity would provide the best mechanisms for the allocation of resources within society.

Communitarians still emphasise the right to equality of opportunity for poorer or less capable members of society, but claim there is a need to focus on developing societal values of reciprocity and trust (Bellah 1985; Bellah et al. 1992; Giddens 1998; Keating, and Weller 2001). Communitarians also soften the focus on economically rational individuals by emphasising the role that historico-social norms have on the choices available to individuals, and by stressing that a focus on virtue and civic society is important in connecting individuals and their communities (Etzioni 1968, 1993; Stretton, and Orchard 1994: 266). An implicit belief in the virtue of humans underlay early understandings of citizenship (Seligman 1993) and this belief in the moral virtue of citizens is increasingly being referred to by communitarians (Ignatieff 1995). These communitarian influences are still based on key liberal democratic government ideas, but include the role of society in creating active citizens who build democracy and shared values for the social good. Hence communitarians focus on the role of a virtuous

collectivism to re-allocate resources and believe such civic virtues can be taught and passed on in society (Etzioni 1993; Stretton, and Orchard 1994).

The processes of communication and associative democracy are therefore considered essential to allowing communities to deliver services while avoiding exclusionary elitist societies, and there is much debate around how this might best occur (See for example Bellah 1985; Bellah et al. 1992; Hirst 1994; Morgan 1996). Decentralisation is believed to help this communication by allowing local community organisations to deliver services that are flexible and locally accountable because they allow local individuals to more easily access and have voice in local settings.

The views on citizenship in political debate have however been largely simplistic and normative, operating on dualisms and ignoring important elements of context (Fyfe, and Milligan 2003: 405; Hindess 2002: 129; Morgan 1996; Walzer 1995: 162). Two key debates in the understandings of citizens revolve around whether citizens are active or passive in matters of social equality, and whether citizens focused on the interests of the individual or of the broader community achieve more equitable outcomes. While there are many versions of liberalism and communitarianism making generalisations difficult the focus of discussion herein are those understandings that have influenced Australian and New Zealand politics in relation to proponents of neo-liberalism and communitarianism. The issue of equity is central to these views, for neo-liberals believe freedom, markets and equality of opportunity will work best for all (Hayek 1960; Saunders 1993). Communitarians propose that equality of opportunity in hand with a collective sense of virtue and responsibility is the key to a suitable social resource allocation and cohesive society (Etzioni 1993; Stretton, and Orchard 1994). Both views require volunteer effort from citizens to participate in community groups and services.

The shifting views of citizenship over the last two decades have affected how volunteers are seen as a solution to social ills and consequently have influenced government policies that affect service volunteers. While theories of the role of citizens in maintaining a stable society are not based on empirical evidence, the

policy spotlight on volunteers has spawned a growing body of literature that has examined the effects of government policies on the volunteer sector. The underlying assumptions of volunteer agency and virtue found in this literature raise the question, what evidence is there that these policy assumptions translate into real effects?

## **Broad political influences on the non-profit sector**

That government policies and volunteers are integrally connected is uncontested, and while much of the preceding and following literature deals with specific impacts of government policies on volunteers and their organisations, very little literature deals with the broader picture. Increasingly however, the importance of the historical, social and cultural context is being acknowledged as is the role of resources in this relationship (Butcher 2006; Lyons 1998; Onyx 2000; Salamon, Sokolowski, and Anheier 2000). The economists' debate of the 1970s and 1980s largely centred on the question of whether volunteers cater for gaps in government service or whether governments cater for inadequacies in voluntary service (Salamon 1987; Weisbrod 1988). Recently scholars have begun to address the nature of government and non-profit sector relationships, through the use of case-studies and meso level studies, and several authors have challenged the reliance on neo-liberal theories (Arai 2000; Ilcan, and Basok 2004; Salamon 1987; Salamon, and Anheier 1994; Salamon et al. 2000; Warburton, and Smith 2003). Increasingly the complexity of government and non-profit sector relationships are being uncovered as are some of the negative results of neo-liberal policies.

Evidence of the complexity of the influences of political approaches on the nonprofit sector has come from cross country comparisons using large data sets. The John Hopkins Comparative Nonprofit Sector Project (Lyons 1998; Salamon, and Anheier 1993, 1994; Salamon, and Sokolowski 2001; Salamon et al. 2000) collected data on the scope and role of NGOs across a total of 40 countries and provided new insights into the broader picture of volunteering. The relevance of approaches that study the nonprofit sector considering cultural and structural factors was highlighted by comparing a subset of data from twenty countries (Salamon, and Sokolowski 2001; Salamon et al. 2000). A regression model that

incorporated historical and social explanations highlighted the inadequacy of 'single-factor' liberal and socialist explanations for the non-profit sector and supported explanatory theories that incorporated cultural and/or historical factors into explanations of volunteering. The authors propose 'social origins' as a useful approach to explaining patterns of volunteering (Salamon et al. 2000: 15-20). They found the size of a country's non-profit sector was related to different economic, social, and political cultures where government influences on volunteering must be considered through a lens that accounts for the balance of power among groups, classes and sectors.

Salamon and others used an approach that incorporates broad cultural and structural factors and built on work that had applied a social origins approach to studies of democracy/fascism (Barrington Moore, Jr 1966 cited in Salamon et al. 2000) and the modern welfare state (Gosta Epsing-Anderson 1990 cited in Salamon et al. 2000: 15). Both Moore and Epsing-Anderson identified that class-based and institutional power conflicts influence the development of political models (Salamon et al. 2000: 15).

An analysis of how the power balance between different social groups affects the non-profit sector led the authors to propose four models of nonprofit development: liberal, social democratic, corporatist, and statist (Salamon et al. 2000: 16). Australia and the US are said to exemplify the liberal model, where modest government spending on social welfare spending is matched by a relatively large nonprofit sector. The class conditions attached to this model include a large middle class that prevents landed elite and working classes from dominating the political agenda (Salamon et al 2000: 19). This 'social origins' explanation for patterns within the non-profit sector, provides a theory that incorporates structural and cultural factors in explanations for the voluntary sector. By acknowledging that power and the struggle for resources influences levels of volunteering in-hand with the socio-cultural context, the simplistic assumptions of neo-liberal political explanations are exposed.

These social origins studies are notable because often there is a lack of theory and critical perspectives in voluntary sector research (Cameron 1997). Cameron in his

review of four key British texts claimed that “implicit theories are for the most part uncritical and unadventurous” (1997: 84). Only Marxist approaches have historically applied a critical lens to volunteers that acknowledges structural influences on volunteering. Sociologists using a critical Marxist approach to community studies in the 1950s and 1960s argued that voluntary associations supported the maintenance of power and the class system by allowing the economic sphere to dominate the social sphere (Lyons 2001: 206-210). Traditional Marxist approaches view power as structurally embedded and that oppression and dominance are wielded through factors such as status, race, class and gender (Lyons 2001). However, Marxist approaches only see the volunteer class based power operating in one direction in a theoretical framework of domination and oppression, with little close examination of how this might operate.

There are several approaches that acknowledge the importance of the structural context for volunteering and highlight the role of formal organisations in supporting volunteering. Salamon and Sakalowski (2001: 22) furthered the social origins approach to argue that countries need organisational structures that support volunteering in order to foster volunteer effort. Agency theories have similarly explained the role of NGOs and associational networks in mobilising citizens as volunteers and providing an avenue for citizen participation and representation in society (Almond, and Verba 1989: 265). Based on a linear regression approach Salamon and Sakalowski (2001: 20-22) argue that volunteering is structural as well as being influenced by the role of the state and class based conflicts within countries (Salamon, and Sokolowski 2001: 20-22). By classifying volunteer functions into expressive *volunteering*, encompassing cultural and recreational volunteering, or *service volunteering*, encompassing welfare and health volunteering, they linked the role of the nonprofit sector to socio-political conditions that benefit the nonprofit sector structures and organisations. Their analysis found more expressive volunteering in social democratic countries which they explained as a product of the support offered to citizen participation groups by social democrat governments. Equally they found more service volunteering in liberal countries, which they explained as the result of NGOs being more likely to gain support for providing services than for expressive cultural activities in

countries such as Australia with limited welfare provision (Salamon, and Sokolowski 2001: 15). Volunteers it seems do not simply respond to ‘too little’ or ‘too much’ government, but instead are influenced by cultural and structural conditions, including those of the organisations that recruit and interface with volunteers.

While the government/volunteer relationship is more complex than simple economic ‘gap’ arguments would suggest, the evidence does show that liberal governments can foster or cause more service volunteering. The thirty-one per cent increase in volunteer numbers within the non-profit community services sector between 1995 – 2000 (Australian Bureau of Statistics 2003: 3) suggests that volunteers did in part compensate for government failure and became more important in the provision of health and welfare services in Australia. In New Zealand, NGOs also provide services to marginalised populations ‘low-income populations, rural communities, and Maori populations’ (Crampton, Woodward, and Dowell 2001: 12). This increased involvement in service provision however was not a simple case of volunteer citizens filling a gap, but was instead strongly supported by policies of devolution and contracting out of services to NGO organisations.

There have been criticisms of this approach as mere cost-cutting (Cox 2000) and some studies suggesting that the results have adversely affected NGOs and volunteers. One criticism of neo-liberal policies is that it is not certain that volunteers can deliver adequate or equitable services in a competitive environment (Ohlin 1998: 20). At a system level, it is not clear how coordinated services can be delivered by a non-government sector (Ohlin 1998: 14; Sommerfeld, and Reisch 2003). NGO managers may lack the skills, networks, and impetus to deliver changes occurring through new policy directions, and new structures may need to be designed to facilitate a greater volunteer role in welfare delivery (Poole 2003: 336). Salamon (1987: 39) coined the phrase ‘voluntary sector failure’ to argue that while volunteers initially compensate for gaps in government services, governments then step in when service provision requirements become too large for NGOs. Difficulties in fund raising, amateurism and a paternalism of values are all barriers to NGOs delivering adequate services

(Salamon 1987). When the complexities of modern welfare services are considered alongside evidence of piecemeal and amateurish volunteer services, it is questionable whether NGOs can deliver adequate or coordinated services. Furthermore, opening up areas of government to market forces through neoliberal policies has decreased the scope of government and citizen rights, which suggests a decrease in volunteer agency (Arai 2000: 264; Hindess 2002: 140; Morison 2000: 100).

Equally, it has been shown that voluntary agencies do not necessarily deliver equitable services in areas of need, nor do they necessarily deliver increased consumer choice. NGOs can have a narrow focus and not offer services widely enough as they focus on meeting one need or serving one group at the expense of others (Salamon 1987: 39-42). On the whole the down-side of voluntary sector service delivery is little researched (Cameron 1997: 84; Davis Smith 2006: 9).

Problems of volunteer delivered services are neither necessarily well examined nor considered by policy makers and some commentators have criticised this lack of information. Weisbrod (1988) challenged policy makers because the enormous growth of the sector in the US was not supported by research on effectiveness. Others call for comparative research to evaluate the quality and effectiveness of the use of NGOs for service provision (Crampton et al. 2001: 16; McDonald, and Marston 2002 387; Sommerfeld, and Reisch 2003) and Lyons (1998: 203) bemoans the short-sightedness of Australian policy makers in not considering the available evidence and implications of nonprofit sector policies. One study that surveyed volunteers on their attitudes to planned policy changes found that many volunteers indicated they would leave the community legal services if fundamental governance structures and service values changed (Melville 2002: 53). The poor evidence base of volunteer oriented policies is one challenge in government/volunteer interactions.

While there may have been little research prior to the introduction of neo-liberal style policies there has since been interest by scholars to understand how those policies have affected NGOs and volunteers, particularly in Britain where two collections of work contained case based studies. *Researching the Voluntary*

*Sector* (Saxon-Harrold, and Kendall 1993) and *Voluntary Organisations and Social Policy in Britain: perspectives on change and choice* (Harris, and Rochester 2001) both reflected the level of interest in changes affecting the nonprofit sector.

A shift in power and decreased independence of the collectives organised by and employing volunteers has been one of the key findings of the case based policy research. The contractual and managerial arrangements established with new public management contracts have shifted power away from the small NGOs towards government and larger organisations (Brown et al. 2000; Mocroft, and Thomason 1993: 105-106; Pusey 2000: 21; Scott, and Russell 2001: 52-54; Turner 2001). As organisations increase their involvement in government sponsored welfare they gain financial leverage, but lose power and autonomy through government driven administrative and contractual arrangements. One cause of this power shift is 'value drift', a move away from the original core goal or value of an organisation occurring as NGOs shift focus in order to access government funding (Harris 2001: 218). Compounding this issue are findings that suggest organisations find it difficult to provide both services and advocacy and therefore when funded to provide services, advocacy diminishes (Acheson 2001: 291; Salamon 1987: 44). This has important implications in a neo-liberal environment that fosters service volunteering as it suggests service volunteering will increase at the expense of the civic society role of volunteers.

Neo-liberal style policies are affecting volunteers by impacting on NGOs. Some scholars have suggested that there is a division opening up between grassroots organisations and more corporatist or market driven NGOs (Knight 1993; Milligan 1998) and that the smaller community organisations are disadvantaged by managerial practices (Mocroft, and Thomason 1993: 109; Morison 2000: 110; Scott, and Russell 2001: 52-54). Government regulation makes NGOs more bureaucratic, and competition for contracts with for profit businesses can see the demise of smaller organisations (Lyons 1998: 16-17). At a broader level, governments have affected the size of the nonprofit sector through legislation, funding models, competing with service delivery, and levels of ideological support (Lyons 2001: 115-116). Even more broadly Pusey (2000: 21) suggests



that Australian neo-liberalism has seen a major redistribution of resources and power from the public sector, consumers and households to private business and markets, affecting the middle-classes particularly and limiting their ability to volunteer. The volunteer sectoral and organisational environment is changing as a result of recent policies and yet little research has considered the impact of these changes on volunteers.

Changing managerial practices and an increase in professionalisation within NGOs are other key findings of the case study research. The reliance of non-profit organisations on government funding exposes them to increased government regulation and an increased requirement for professionalising of the volunteer workforce (Arai 2000; Harris 2001: 218; Turner 2001: 202; Warburton, and Mutch 2000: 38). Accountability and managerial demands are argued to threaten the participatory democracy component of the volunteer environment, and the more hierarchical an organisation, the less likely that volunteers will be able to input into decision making (Baldock 1990: 132-133; Milligan, and Fyfe 2005: 427). This lack of volunteer voice in policy suggests that the idea of a rising status for the civil sector has to date been more rhetoric than reality (Harris 2001: 215-216). Volunteer agency may actually be decreasing as a result of neo-liberal policies.

Neo-liberal changes are also criticised for having a negative effect on volunteers as the move towards bureaucratic corporate style NGOs is argued to decrease the ability of volunteers to be 'active citizens'. Milligan and Fyfe's (2005) study of NGOs within the Scottish city of Glasgow, indicated that corporatist welfare NGOs disempowered volunteers by losing 'localness'. The shift towards professionalisation with the resultant hierarchical and bureaucratic structure was implicated in an increase in the passivity of the volunteers. The loss of local management committees and the centralising of policies removed management decisions from the local context, which moved the decision making processes away from the local context and local volunteers. These processes were felt to add up to a 'loss of local identity as the organisational structure at the level of the local community becomes a non-autonomous part of the bigger organisation' (Milligan, and Fyfe 2005: 428). Such studies as these suggest volunteers within

large service providing organisations cannot be assumed to equate with active citizenship.

Recent policy tools such as mutual obligation and justice system community service obligations have focused some attention on assumptions of volunteer 'free will'.

There are claims that such policies coerce individuals to volunteer. Problems with this coercive form of volunteering were often identified by NGOs and volunteers (See for example Flick, Bittman, and Doyle 2002: 68-70; Warburton, and MacDonald 2002). Studies of the impact of 'forced volunteering' on the unemployed show that they are well aware of the element of coercion and that this appears to undermine positive feelings of citizenship (Cockram 2003; Sobus 1995; Warburton, and MacDonald 2002; Warburton, and Smith 2003). Coerced youth were seen as less committed and as having a lower skills base by other organisational members, thereby requiring significant training and supervision which NGOs see as cost shifting by the government (Cockram 2003). A serious complaint by some NGO managers was that they felt used by the government without adequate funding to support this new role in training and ensuring youths meet reciprocity obligations for welfare payments (Flick et al. 2002: 78). There is some basis then to concerns that recent government directions may actually destroy the active citizenship they seek to foster.

Some commentators have also suggested that coercion in the more subtle form of pressures and feelings of responsibility challenge the assumptions of volunteer agency. In rural areas particularly, there may be a sense of expectation that someone needs to provide services and only a limited number of skilled individuals are able to volunteer (Flick et al. 2002: 54). Within indigenous communities too, there may be such strong kinship obligations that "notions of 'choice' and 'necessity' become redundant" (Kerr and Tedmanson 2003: 27). Pusey also notes the increasing pressure that young job seekers are under to volunteer in the name of work experience (2000: 28). The upsurge in corporate volunteering also, where businesses support employees to undertake volunteer work (Flick et al. 2002), raises issues of subtle pressures. These issues of coercion and necessity support the argument that policies impact on the very identity of volunteers and yet they are based on untested assumptions.

Scholars, adopting a governmentality perspective, have focused on how new forms of liberalism are constructing 'active citizens' as service providers. These authors argue that 'advanced liberalism' does not rely on the goodwill of citizens for helping to solve social and economic problems, but instead actively constructs the responsible citizen (Arai 2000; Ilcan, and Basok 2004; Lacey, and Ilcan 2006: 47; Rose 1999). The way citizens have become 'responsibilized' to provide services under advanced liberalism, has taken away from their identity as advocates of social justice (Ilcan, and Basok 2004: 141). This approach suggests that by changing the identification of volunteers, citizens are manipulated to undertake volunteer delivery services to the detriment of social justice issues.

Not everyone considers the policy-induced changes to be negative. The increased professionalisation and accountability of managerial practices is seen by some to be long overdue, and some volunteers prefer this style of organisation (Metzer et al. 1997 Scott, and Russell 2001). Some evidence from compulsory volunteer activity in the US indicates that it may form a viable avenue for entry into volunteerism for some, and that once involved, those who were initially coerced may begin to see their contribution as voluntary (Ellis 1997; Rifkin 1995 cited in Phillips p 8). Some of the dire predictions of increased poverty from US policies did not materialize even though NGOs were found to lack capacity (Poole 2003:328). Equally, despite the critical perspective often taken by Salamon and others (Salamon 1987; Salamon, and Anheier 1994; Salamon et al. 2000) they still argue for the value of the nonprofit sector and work to improve it. Salamon (1987: 42) for example argued that the nonprofit sector and the government sector complement each other and that collaboration would provide the best way forward, but only when suitable methods for ensuring co-operation were developed. Milligan and Fyfe (2005: 431) similarly propose that passive citizenship need not be the result of NGO professionalisation and growth if organisations retain decision making structures that allow local volunteer participation. It may be that what is needed to avoid the shift away from local concerns towards bureaucratic agendas are organisational structures that continue to incorporate local concerns.

In summary, while the political theories underpinning many policy directions may be simplistic they cannot be ignored as they inform our discourses about volunteers and therefore will be found in volunteer identity work. Citizen discourses revolve around ideas of resource distribution and differing concepts of equity: equality of opportunity or outcome. Recent policies have moved away from the welfare state focus on equality of outcome towards a neo-liberal and communitarian focus on equality of opportunity. Underpinning both neo-liberal and communitarian theories are concepts of how active citizens can achieve equity: for neo-liberals it is citizens focused on individual concerns, and for communitarians it is citizens meeting collective concerns. Each approach therefore has a different focus on interests and equity but both approaches see volunteer citizens as having agency.

An important consequence of recent volunteer studies is the shifting of the volunteering debate away from simplistic arguments. By highlighting the role that social, cultural and political contexts have on the size and role of the nonprofit sector a new direction for volunteer studies has been opened up. This study of volunteer agency will benefit from applying a critical perspective to identity that facilitates the incorporation of cultural and structural contexts, and that acknowledges the effects of power relations on volunteers. Furthermore, since the structures and processes that allow volunteers to interface with organisations could be critical in whether or not volunteers are active or passive citizens, further study is needed to address this.

Political theories of citizenship and therefore policy expectations of volunteers draw on key economic, sociological and psychological theories. Underpinning the debates on individualism and collectivism is a key assumption of volunteer agency. The concept of volunteer agency influences how we understand volunteers and volunteer identity. The following section will outline the key contributions to our understanding and to volunteer identity that draw on the concept of the volunteer as agent.

## ***The volunteer as agent***

Assumptions of volunteer agency have influenced studies of the micro processes of volunteer involvement. To further understand volunteer agency it is necessary to understand the processes of volunteer involvement in services and yet this aspect of volunteering has been ‘rarely addressed’ (Pearce 1993: 5).

When studying how volunteers become involved in organisations the foci of motivations, prosocial behaviour, and social networks have prevailed, consequently there has been little attention given to the processes that facilitate a volunteer interface with organisations and issues of power. Motivations are one of the strongest themes in the current knowledge base about the processes of volunteer involvement in organisations.

### **Motivations – a psychological explanation of volunteering**

Since Lord Beveridge’s report *The Evidence for Voluntary Action* (1948) volunteer motivations from a psychological perspective have dominated much of the literature and discourses concerned with understanding why people volunteer. The general trends in motivational theories have been reflected in the volunteer literature, beginning with assumptions of automatic type responses to internal or external forces, moving to a focus on the self, to a more recent focus on agency and achieving goals. Most volunteer motivational studies deal with a particular volunteer group and there is a body of literature on service volunteers. Service volunteer motivational studies have used both quantitative (Marx 1999; Omoto, and Snyder 1993; Rubin, and Thorelli 1984) and qualitative approaches (Chambre 1995; Yeung 2004) generating differences in findings. However, elements of altruism and egoism are commonly found as explanations of volunteer motivations (Van Til 1985; Yeung 2004: 23) with the extent of the mix varying according to overarching societal discourses.

Hence after the middle of the 20<sup>th</sup> Century volunteer motivational literature relied strongly on prevailing 'rational man' theories as an explanation of collective action (Stretton, and Orchard 1994 : 68). Economists during the twentieth century largely believed that volunteers benefited from the process of volunteering by

gaining some individualistic reward. The relation of the rational man theory to collective action was detailed by Mansur Olson (1965) in his influential work *The Logic of Collective Action: Public Goods and the Theory of Groups*. To explain why individuals contribute to the public good through collective action, Olson theorised that the individual was driven by incentives such as money, social status and social acceptance to act irrationally and contribute to a group that delivers a public good (Olson 1965: 2). In Olson's view only incentives or coercion would lead rational individuals to work for the community good, and any other motivation was irrational. Prior to Olson's theory it was generally accepted that people would "instinctively or naturally act on common interests" (Marwell, and Oliver 1993 : 5). The rational man focus generally led many to deny or question the value of underlying assumptions of altruism that had previously attached to volunteers (See for example Smith 1981; Stebbins 1996).

Rational man explanations of volunteer motivations were softened by the functional explanation offered by Clary, Snyder and others (1991; 1998). They applied functionalist theories to a factor analysis of volunteer participation and found that a range of social, economic and psychological needs are met by volunteer involvement. Using the Volunteer Functions Inventory survey instrument they (Clary et al. 1998: 1527) showed that six functions can explain volunteer motivations: values, understanding, social, career, protective and enhancement. Using the functional approach, altruism is considered to be a value benefit for the individual volunteer because they are able to act on a value that is important to them. Other important functions highlighted by the theory were enhancement and social functions, which help individuals develop a sense of achievement, reputation, new skills, and self-approval for doing the right-thing (the 'warm-glow' syndrome). Volunteering also offers social contact by affiliation with groups, friendship, social meetings, and being part of a team. Career and protective functions are also likely to be provided by similar benefits of volunteering with an increase in social networks and strengthening of social participation skills (Clary et al. 1998: 1517-1518).

The application of functionalism to volunteer motivations acknowledges the agentic pursuits of individuals' goals in a manner that incorporates prosocial

behaviour and relates to matters of the self and identity (Clary et al. 1998: 15261528). This approach therefore moves away from a narrow economic rationalism approach, but fails to fully acknowledge the role of power and structure in this process, still treating altruism as a form of volunteer self-interest. The importance of the fit between the volunteer situation and volunteer motivations is however given some examination, and the functionalist approach sheds light on the interactional nature of volunteers and the organisations they provide labour for (Clary et al. 1998: 1527). Following Clary and Snyder we now know that the nature of the volunteer experience needs to match the key volunteer motivations in order for volunteers to engage with, and sustain interaction with an organisation. The need for further understanding of the volunteer/service interface is therefore highlighted.

Increasingly studies point to the correlation of outcomes and goals and the shifts that occur in motivations over a period of volunteering (Tschirhart et al. 2001). For example, self-esteem gains were found to be strongly linked to greater social and altruistic goal achievement in one recent study on stipend volunteers (Tschirhart et al. 2001: 438). The length of time that volunteers spend with the one organisation also affects their motivations. Studies have found that over time volunteers are driven less by altruistic motivations and instead become more focused on service goals (Pearce 1993; Phillips 1982; Tschirhart et al. 2001). Overall, these studies uncover some of the complexity of volunteer motivations and have begun to link volunteer motivations to a focus on external factors. The literature generally takes a utilitarian approach by arguing that there is a need to understand volunteer motivations in order to ensure retention through satisfying volunteer experiences.

Understanding the diversity of motivations that volunteers can bring to a service also fits with recent studies pointing to the role of life-stage and life-course to patterns of volunteering (Herzog, and Morgan 1993; Knoke, and Thompson 1977; Warburton, and Terry 2000). Accordingly young people are more likely to volunteer to assist their employment prospects, parents of young children are likely to volunteer for school-based activities such as sport, and elderly people are likely to volunteer to provide activity. The life cycle motivations framework also

feeds into an emerging dichotomous discourse of the traditional versus the new volunteer and concerns about the level of commitment (Wilson 2001; Zappala, and Burrell 2001). Traditional volunteers are linked strongly to the charity model volunteer, identified as middle-aged housewives using their free-time (Wilson et al. 2001: 137). Meanwhile new volunteers are identified as likely to be younger and busier people who wish to contribute skills in short bursts of activity without long-term commitments to organisations (McDonald, and Warburton 2003: 393394).

While most volunteer motivational studies still focus on the individual, Yeung's (2004) phenomenological study of social service volunteer motivations incorporated the context of the self and society. Yeung (2004: 42) developed a model that used a more holistic motivational approach to volunteering, and in the process challenged the perception that processes of modernization and individualization were causing volunteer motivations to shift towards personal interest and gain. Instead the late-modern context was described as increasing the demands on individuals and thereby promoting 'diffuse interests' (Yeung 2004: 42).

One result of individualist motivational research is the focus on volunteers meeting self-interests which have led to research and discourses that focus on the benefits of volunteering. This benefit focus is justified by its ability to promote and attract volunteers. Several studies highlight that there are health benefits, employment benefits, and civic participation benefits to be gained from volunteering (Greenfield, and Marks 2004; Onyx, and Warburton 2003; Wilson, and Musick 1999). But a benefit focus could be problematic as it may detract attention from the personal and social costs of volunteering as well as the social conditions that create a need for volunteering. Wilson and Musick's (1999) review of the empirical evidence of the effects of volunteering on volunteers found that broad generalisations from cross-sectional data sets were unsuitable as benefits were dependent on the type of volunteering and the volunteer. They caution against allowing a focus on volunteering as a solution to an individual's problems as it may encourage political attitudes that blame the individual and ignore social and structural forces (Wilson, and Musick 1999 168). Such arguments can be



extended in part to the motivational volunteer literature with its focus on individual agency, and benefits, as there is little recognition of coercion or costs of volunteering.

While studies of volunteer motivation have progressed from single factor individualist explanations to more comprehensive and holistic theories, this body of work is often targeted towards volunteer managers. The psychological explanations of volunteer motivation have been a strong influence in volunteer literature because of the utilitarian focus on answering the managerial concerns of recruiting and retaining volunteers. The importance of the studies is usually linked to enabling a greater capture of volunteer labour as motivations show how volunteers can be more easily attracted to organisations and retained for longer periods (See for example Clary et al. 1998; Tschirhart et al. 2001; Zappala, and Burrell 2002).

The motivational literature helps build an understanding of volunteer identity as it suggests how volunteering interacts with personal identity development. However, while scholars such as Clary and Snyder (1998) and Yeung (2004) have addressed more holistic issues such as values and interests, the motivational explanations of volunteering remain acritical and do not incorporate social and cultural factors. The volunteer motivation literature, even that which links volunteer motivations and goals does not address the issue of power and interests in volunteer motivations and reflects a general lack of critical perspective in volunteer related literature.

## **Prosocial behaviour – altruism and socialisation**

Sociological theories have shed light on volunteering as a form of prosocial behaviour and group behaviour. They have placed volunteers in a broader social context where group norms influence behaviour, however, the influences of ‘rational man’ thinking appear to have affected even this sociological approach which aims to understand why people would be altruistic.

Altruism is a form of prosocial behaviour which is ‘intended to benefit another, even when this risks possible sacrifices’ (Monroe 1996 cited in Knox 1999: 477).

Altruism is seen as fundamental to the ethos of volunteering “the value of disinterested giving and altruistic action” (Kenny 2003: 17). Cultural, psychological, evolutionary and personality theories have all been used to answer questions of altruism.

Reciprocity is a key sociological explanation for altruism. It is argued that altruism is maintained in society because altruistic behaviour is rewarded, and non-altruistic behaviour punished by a large portion of the population (Gintis 2003; Trivers 1971 cited in Penner et al. 2005). While the strength of ‘blood ties’ and prosocial behaviour has been demonstrated in numerous studies, the role of groups and reciprocal altruism is used to explain altruism with those other than relatives (Penner et al. 2005: 370). This reciprocal type of altruism is believed to have provided evolutionary benefits to humans (Penner et al. 2005: 369-371) and these evolutionary arguments have been widely accepted though not unchallenged (Gintis 2003: 157; Penner et al. 2005: 369-372).

Initially evolutionary approaches supported the argument that altruism was really based on self-interest and harsh judgements of altruistic behaviour were common in the 1970s: ‘What passes for cooperation turns out to be a mixture of opportunism and exploitation....Scratch an altruist, and watch a hypocrite bleed’ (Ghiselin 1974: 247 cited in Gintis et al. 2003: 154). However, Gintis and others (Gintis 2003; Gintis et al. 2003) using experimental data have begun to argue that not all reciprocity can be explained by self-interest, and propose that ‘strong reciprocity’ is a predisposition to cooperate with others that spreads through the internalization of norms and provides evolutionary benefits. This approach fits more strongly with ideas of an inherent prosocial capacity in humans and Archer’s (2000) theory of the developmental process of identity.

The process of internalizing norms of altruism is central to Gintis’s (2003:181) explanation of prosocial behaviour. Socialisation theory with the idea that cultural and social norms are passed on over generations by the internalization of norms has strongly influenced many sociological studies (Durkheim 1951; Mead 1963; Parsons 1967). There is support for the socialisation link to volunteering as the link between cultural norms and volunteering has been shown in many studies.

For example, studies have found strong links between religiosity and volunteering (Fisher, and Schaffer 1993; Wilson, and Musick 1997; Wuthnow 1987, 1998); and differences in gendered volunteer roles (Australian Bureau of Statistics 2000).

Cultural explanations of volunteering have recently considered identity and roles as explanatory frameworks. Grube and Piliavin (2000; 2002) used a role identity model to explain volunteer retention. The model explains that the perceived expectations of others motivate individuals to volunteer, but that the experience of organisational factors such as status or the role, lead to the development of a 'volunteer role identity' where the role becomes part of the volunteers personal identity (Grube, and Piliavin 2000). The model when tested found significant associations between volunteer role identity and intentions to continue volunteering and the hours volunteered and the authors argue that a volunteer role identity is necessary for sustained volunteering. The study also considered the effect of organisational experiences on retention and fostering a volunteer role identity and found that status and how the organisation used funds were important. The role identity model while providing new insights into volunteer retention continues to focus on the volunteer as an individual, and targets managerial concerns of sustained volunteering. By focusing on role identity, the authors place themselves within the psychological identity tradition of the late 1970s which lacked a critical edge, presenting identities as relatively fixed and stable factors born of roles.

In a development on their original work, the concept of role as a resource was used to incorporate matters of both structure and agency in a study of how identity could explain social dissent (Piliavin et al. 2002). The authors place social roles as 'a central resource for establishing identity and for structuring the self' (Piliavin et al. 2002: 481). These findings highlight that studies of identity may be a fruitful area of theoretical exploration in volunteer studies.

The use of social identity for explanations of prosocial behaviour have focused on the way an individual's identity is influenced by group norms and values and how this facilitates cooperative action (Klandersman 2001: 277). There is a significant level of loyalty between members of in-groups, but group boundaries are flexible

and can change as situations change, in a manner that fits with Archer's morphogenesis (2000). Some studies have found that re-categorising in-groups to be more inclusive can reduce conflict and bias (Gaertner et al 2000 cited in Penner et al. 2005: 382) There is room for further work on how volunteer identity affects group performance and the stratification and power issues inherent in in-group and out-group interactions and conflicts.

Studies of prosocial behaviour have demonstrated similar patterns to those of citizenship and volunteer motivation, that is a siloing of economic, psychological and sociological theory (Gintis 2003: 155). All of these single factor analyses increase our understanding of volunteers, however, only recently have explanations of volunteering that incorporate elements of psychological, economic and socio-structural theories been proposed. Gintis (2003) uses internalization of norms to link sociological, economic and evolutionary arguments of altruism. Volunteering has also been explained by linking personality, social structures, and intrapersonal cognitive processes (such as identity) through the use of a large national dataset (Hart, Atkins and Donnelly cited in Penner et al. 2005). In another example, demographic characteristics were linked with a range of capital (social, cultural, and human) to look for predictors of volunteering (Wilson, and Musick 1997).

The use of more integrative theories to explain volunteering fits with the approach taken in this study, where both individual and collective concerns are incorporated. However, within volunteer studies such approaches are still relatively new, and there is a dearth of literature that includes structural concerns within such approaches. The upsurge in interest in social capital and networks has been one recent approach that links cultural and structural concerns to explanations of volunteering, and the utility of this approach will be explored next.

### **Social networks – resources and social capital**

Studies of civil society and activist volunteers place great emphasis on the role of NGOs and social networks in maintaining a viable democracy by facilitating coordinated action (Minkoff 2001). Alexis de Tocqueville first suggested the

connection in his 1830s study *Democracy in America*, believing that America's democracy was strengthened because its citizens were frequent joiners of associations (De Tocqueville 1953). The role of NGOs in recruiting and mobilising citizens as volunteers is believed to have a mediating effect on both the private sector and the public sector, while creating avenues for participation and representation in our society (Almond, and Verba 1989; Minkoff 2001).

Involvement in informal organisations such as the local sports clubs, school groups and emergency services is viewed as providing alternative local services and simultaneously providing a training ground for more formal involvement in governance. This means that NGOs are important when they have autonomy from government, because they provide diversity, and support the potential for political action (Dahl 1957; Minkoff 2001). Volunteer agency is key to these understandings because volunteer members are believed to exert significant influence over the activities of the organisations they join, because if dissatisfied they may simply withdraw their labour and support.

It was the argument that participation in society and the building of networks secures economic and resource benefits that popularised Putnam's version of social capital (1993; 2000). This essentially economic argument for the benefits of voluntary associations generated substantial global policy interest in social capital (See for example Australian Bureau of Statistics 2002; Fukuyama 1995; World Bank 1999). Social capital was embraced as a policy solution in which volunteering was central (Boix, and Posner 1998: 686; Flick et al. 2002: 6-7; Fyfe, and Milligan 2003: 408; Whittaker, and Banwell 2002:252-253; Winter 2000: 1718). Social capital was seen as both a solution to individualism and a concept that could humanise 'rational man' policies (Hawe, and Sheill 2000; Onyx 2001).

Putnam (1993) developed his theory after comparing northern and southern Italian regional governments and finding significantly more civic engagement in northern regions than southern. In his theory individuals develop the ability to cooperate and feel involved in the public-sphere through group association, which in turn improves societies effectiveness (Putnam 1993: 89-91). Shared understandings of reciprocity and responsibility create trust amongst groups which eases the way for

future cooperative actions, making them increasingly efficient. According to Putnam (1993) a society with a large number of such associations and networks, and hence social capital, will have increased political participation and improved governance due to the training and norms of responsibility instilled by group association, along with the traditional benefits long argued by pluralists such as the ability of interest groups to participate in democracy. Further, as a consequence of changes in leisure activities towards activities such as socially isolating television watching, societies like America are experiencing a decline in civic society and social capital (Putnam 2000). Putnam's argument is largely an economic one, focused on regions and national settings, where volunteers are both a key mechanism for building trust and strong social networks (Putnam 1993: 163-164) and a result of strong social networks (Stone, and Hughes 2002). Thus volunteers are seen as an important indicator of social capital as they represent a highly organised level of cooperation to provide mutual benefits in the form of private and public goods with claims of resultant social, economic and democratic benefits for society.

There is a wide base of support for the idea, and some empirical evidence, that a civil society with strong vibrant networks does assist social cohesion and participatory democracy (Dekker, and van den Broek 1998: 35; Onyx, and Leonard 2000), and that some types of networks and trust can assist marginalised groups (Collier 1998: 24-25). Networks are described in various ways in the literature. Baum talks of “thick and thin or embedded and autonomous networks” (Baum 1999; Baum et al. 2000), but networks are also described as either horizontal or vertical depending on the direction of communication and levels of hierarchy (Putnam 1993: 174). Equally, social capital associations can be studied at the local or informal level, such as used by Putnam, or at a broader level of hierarchical associations and formal structures such as government (Grootaert 1998: 4). As attention becomes focused more closely on the different types of networks the blanket claims of social capital have come under scrutiny.

Several challenges to the claims made of social capital have been raised (see for example Knack 1999; Ponthieux 2004; Portes 2000). Firstly, the claims of a decline in social capital in America have been criticised as evidence suggests that

trends are variable, not in decline, and that forms of participation are changing not vanishing (Dekker, and van den Broek 1998; Norris 2001; Wuthnow 1998). Social capital causality is equally not clear. For instance, it is possible that in secure societies people are more trusting and therefore more likely to associate (Norris 2001: 16), and that social capital is most productive in strong communities (Onyx, and Bullen 2000). One study found more evidence of social capital amongst passive affiliations than active citizenship which questions the nature of the link between association and service (Wollebaek, and Selle 2002). The assumption of economic benefits arising from social capital have also been challenged with arguments that social capital will not assist the poor to rise above poverty if their resources are still limited, as strong group cohesion amongst those with resources will work to exclude them (Knack 1999; Portes, and Landolt 1996). And finally, even if social capital is beneficial it seems that government efforts to generate social capital may actually damage trust, particularly in normally self-reliant rural communities where government regulations may be considered intrusive (Onyx, Leonard, and Hayward-Brown 2001: 137).

For service volunteers, it is also likely that social capital is less relevant because they work in hierarchical organisations where there is a recognised influence of structures on social capital networks (Baum 1999; Stone, and Hughes 2002). Putnam himself (1993: 174) argued that it is the structure not the focus of the organisation that contributes to social capital. He claimed that vertical networks (hierarchical power structures) do not build social capital because the inherent power imbalances do not support reciprocity. Instead it is horizontal, face to face networks that build trust which are found in small volunteer organisations. Arguing from a different perspective, Skocpol (2004: EJ) also identifies the importance of face to face interaction in voluntary associations as a method for crossing class barriers and training citizens for political participation. It follows from this argument that those volunteers within large hierarchical organisations such as ambulance services will not automatically build trust, or generate social capital. It may be that vertical hierarchies are inadequate for personalised service provision, and that new network structures will need to be developed for NGOs (Ilbarra 1992 cited in Poole 2003: 335).

There is also a suggestion that social capital may be affected by place-based variations, particularly rural settings and that understandings of place should be considered in policy initiatives (Fyfe, and Milligan 2003: 408). If high levels of social capital result from a high socio-economic status then in marginalised and rural settings, it may be that social capital initiatives only favour those with the capacity to engage with initiatives (Grootaert 1998; Productivity Commission 2003: ix; Shucksmith 2000: 6).

This resource focus links volunteer involvement with access to resources. A 'dominant status model' has been supported by many surveys and multivariate studies, showing that those with higher socio-economic status are more likely to volunteer (See for example Australian Bureau of Statistics 2000; Brown 1999; Smith 1994). This relationship has been ascribed to the extra resources available to those of higher socio-economic status including education, skills and money (Brown 1999; Knapp, Koutsogeorgopoulou, and Davis Smith 1995; Wilson, and Musick 1997). Higher education with a resultant higher income is likely to result in increased resources of time, money, and skills that are needed by NGOs.

The resource mobilisation paradigm places resources as centrally important in assisting a pathway into volunteering, in assisting participation, and in enabling organisations (Minkoff 2001; Verba, Schlozman, and Brady 1995). For volunteers the resource of time is found to be important. Several descriptive and multiple regression studies have highlighted that higher levels of commitment are given by rural volunteers, and older volunteers with more free time, and those with a lower socio-economic status (Lyons, and Hocking 2000; Zappala, and Burrell 2002). However, it is likely that older volunteers while having lower incomes may still have enough economic security to volunteer. The linking of resources to volunteering brings structural conditions into the volunteer explanatory framework, but generally this area has received less attention than motivational studies.

Much of the literature about the process of volunteer involvement with organisations has been focused on individual motivations or collective group processes in a manner that does not account for broader socio-cultural factors.



Literature is often targeted at helping managers to understand how to maintain a supply of volunteers rather than the issue of volunteer workforce sustainability through retention. Yet only recently have scholars turned attention to what happens to volunteers within organisations. The issues of volunteer management will be considered in the following chapter with particular reference to ambulance volunteers, but suffice to say, there is equally a lack of a critical perspective in studies of volunteer management.

### ***The volunteer worker***

The definitions and discourses surrounding volunteers over the last half century have rarely conceptualised the volunteer as a worker. The flow on effects of this have been a serious lack of consideration of volunteer management and the volunteer organisational interface (Pearce 1993: 151).

### **An unrecognised and marginalised workforce**

Despite the focus on, and extent of, volunteering within formal organisations there is a dearth of literature that uses a workforce framework in relation to volunteers (For exceptions see Baines 2004; Pearce 1993; Tilly, and Tilly 1998: 30-32). Several authors suggest that this lack of a workforce framework stems from the strong links between workforce and paid employment, a result of capture by economists (Glucksmann 1995, 2000; Taylor 2004). The efforts of feminists to introduce an economic focus to women's unpaid labour, beginning in the 60s (See for example Oakley 1974; Waring 1988), did not extend to voluntary work (Baldock 1990: 125-126; Taylor 2004: 33). Taylor (2004: 33) suggests that feminism contributed to the economic invisibility of volunteering because it led to an (incorrect) association between unpaid labour (including volunteering), and women's work.

One study that focused on the volunteers as a workforce was Baldock's *Volunteers in Welfare* (1990). Baldock used a feminist perspective to analyse how the organisational settings, work conditions, as well as the motivations, type of work and social class of almost 500 volunteers informed a theory of volunteering. Through this mixed-method study of West Australian welfare sector volunteers

Baldock argues that the ongoing supply of women in welfare service volunteering relies on the often unpaid or low status caring role assigned to women in our society, which effectively marginalises women in the workforce (Baldock 1990: 135-139). This feminist critique of volunteering makes a rare critical contribution to the volunteering literature. During the study though, Baldock revised her view somewhat of the relationship between volunteering and women, and while she maintained that it was a consequence of the marginalization of women in the workforce, she also realized that for many women it was a form of entry into the workforce and the public sphere, a life away from the domestic sphere. In this way volunteering could be empowering and developing for some women.

Nevertheless, Baldock uncovered a segregated volunteer labour force similar to the paid workforce. This segregation means that those with higher socio-economic status become members of a primary (professional) workforce doing committee and managerial type volunteering, and those with lower socio-economic status undertake similar support tasks as those of the secondary workforce sector such as service delivery and caring support tasks (Baldock 1990: 61). The work conditions vary between sectors with the primary sector having good working conditions and benefits, and the secondary sector having more insecurity, low-pay and training (Collins 1978, Power 1976 cited in Baldock 1990: 59 ). A key implication from this finding is that committee members are more likely to be aligned with the interests of managers and therefore are unlikely to effectively represent the interests of service delivery volunteers.

The more bureaucratic organisations such as statutory authorities are likely to see volunteer labor as a cost-cutting device. In this type of organisation volunteers are less likely to be involved in decision making, and are more likely to be expected to undertake training and to work under the supervision of paid staff. This can lead to a subservient volunteer workforce that is treated like a secondary labour market and secondly can lead to problems and tensions between paid and volunteer staff because the focus on altruism can lower the status and pay of paid staff (Baldock 1990: 131-134).

Baldock argued that service volunteers effectively saved government funds for capitalist interests that support production, while maintaining social cohesion through participative democracy discourses (1990: 115-117). The use of NGOs to deliver services allows governments to escape criticism for service reduction, or service gaps as in the case of emergency relief services and HACC services for the aged (Baldock 1990: 109-111).

There are few such explanatory studies of volunteering that place volunteers into a broad socio-structural framework. A recent contribution develops a new framework for understanding work which include forms of unpaid work and which allows analysis of the cultural and structural factors that influence work roles (Taylor 2004). The framework adds the 'demand' for volunteer and paid labour into the equation, and acknowledges that volunteer labour is not purely about individual agency. For example, Taylor (2004: 43) points out how markets for paid labour influence the supply of volunteer labour and how cultural and structural conditions are needed that allow enough income surplus for individuals to be able to pursue voluntary interests. This framework supports a move towards reconceptualising work as a 'total social organisation of labour' instead of a purely economic factor (Glucksmann 2000: 19).

A volunteer workforce approach is innovative as there is little volunteer literature that links volunteers to workforce issues. So while the link between women's increasing employment and decreasing volunteering has been recognised, there has been little attempt to place this knowledge in a context of power, exclusion and marginalisation. Failure to consider volunteers as a workforce has also meant that the organisational treatment and management of volunteers has received little critical attention.

## **Volunteer management**

Good organisational capacity is considered essential to harness, monitor and facilitate volunteer involvement (Grossman, and Furano 1999: 217), and increasingly the literature agrees for the need for professional volunteer management (Brudney 1999; Brudney, and Nezhina 2005; Davis Smith 1996). There is evidence that professional management practices and dedicated volunteer

coordinator time enhance the effectiveness of volunteer delivered programs (Brudney, and Nezhina 2005: 297-298; Grossman, and Furano 1999: 208). By linking to the frameworks of active citizenship and social capital, some have suggested that volunteer management is therefore important in order to achieve a civil society with just and equitable outcomes and a participatory democracy (Cuthill, and Warburton 2005: 120).

Yet the exact nature of best management practices for volunteers is not clear with the few studies addressing best practice considering different elements of management (Brudney, and Nezhina 2005: 298). In managing volunteers there has largely been a reliance on traditional management theory and an increasing tendency to apply techniques that are used for paid staff (Dartington 1992: 32). And as managerial neo-liberal policies influence the accountability of nonprofit organisations, there is an increasing tendency to employ private sector managers and private sector management approaches in nonprofits (Morison 2000: 110).

Managing organisations with volunteers is seen by some to be more difficult than managing profit organisations (Anheier 2000: 6; Billis 1993: 232-233). There appear to be some negatives in treating volunteers exactly like employees, and volunteers have expressed the desire for well organised work, but not to be treated exactly as paid staff (Leonard, Onyx, and Hayward-Brown 2004: 211; Colomy, Chen and Andrew 1987 Paull 2002: 22). Studies that review volunteer perspectives report that volunteers want to be appreciated with a caring management approach that limits autocratic and bureaucratic interactions (Leonard et al. 2004: 210; Paull 2002: 22).

This caring approach has received increased focus with much pragmatic management literature urging services to make sure their volunteers feel valued and recognised (Commonwealth of Australia, and Volunteering Australia 2003; Emergency Management Australia 2003b; Federal Emergency Management Agency 1995) and volunteer recognition activities being one of the most prevalent self-reported volunteer management activities (Brudney 1999: 240). The focus on recognition feeds into Pearce's (1993: 160) suggestion that because volunteers are not dependent on the organisations they work for they need managers who can

successfully motivate them without the use of rewards or sanctions. But managerial contractual and accountability requirements in volunteer using organisations mean that management practices are becoming more formalised and there are increasing contradictions in volunteer management.

Most literature about volunteer management practices come from manuals and anecdotal articles and there is little research on the efficacy of volunteer management or of the individually recommended practices. Brudney’s (1999) research on a sample of US government volunteer programs assessed the use of sixteen management practice characteristics, taken from the recommendations in volunteer management manuals (see Table 1). The programs surveyed were randomly selected from a pool of programs with coordinators (500 surveys, 40% response rate) (Brudney 1999: 245). Seven activities formed a basic volunteer management package (See Table 1), performed by at least three-quarters of the respondent organisations: recognition activities; formal record-keeping; basic training; written policies; active recruitment; looking for high level official support; and job descriptions for volunteers (Brudney 1999: 240).

**Table 1: Volunteer management practices in government programs (Brudney 1999)**

Characteristics of Best Management Practices	% of government programs adopting practices
Recognition Activities for Volunteers	91
Formal Record-Keeping on Volunteers	80
Basic Training for Volunteers	78
Written Policies Governing the Volunteer Program	78
Active Recruitment	76
High Level Official Support for the Program	75
Job Description for Volunteers	72
Ongoing/In-Service Training for Volunteers	63
Liability Insurance Cover for Volunteers	62
Orientation for New Volunteers	56
Training for Employees Who Work with Volunteers	54
Reimbursement for Work-Related Expenses of Volunteers	49
Budget for the Volunteer Program	48

Volunteers Responsible for Managing Other Volunteers	39
Newsletter for Volunteers	37
Annual or Other Evaluation of Volunteers	30

Training was also identified as the most important volunteer support priority in an Australian study, though less than half of volunteer organisations provided any kind of volunteer training excepting health, emergency and environmental sectors which provided higher frequencies of training (Premier's Department NSW 2002: 12).

The lower frequency of other basic activities such as orientation for volunteers (56%), budgets for the volunteer program (48%), and annual evaluation of volunteers (30%) suggests some inadequacy in volunteer management. Despite the importance of management activities stressed within the manuals, the most likely activities to be undertaken suggest a focus on cost-saving rather than well funded support.

Brudney's (1999) research then explored the relationship between management practices and volunteer co-ordinator's perceptions of benefits to the volunteer program. All but three of the sixteen recommended practices were believed by coordinators to have significant benefits to the program. The three identified as not significant by coordinators were basic training for volunteers, reimbursement of expenses and formal record keeping (Brudney 1999: 254). While moves towards more professional management for volunteers suggest there is an increased need for volunteer managers, there is little information about the extent of the use or training of volunteer managers. An Australian survey of rural volunteer using organisations in New South Wales found that only 59% of organisations had a volunteer manager, and of those only 50% had provided training for this role (Premier's Department NSW 2002: 12). For organisations with more than ten volunteers there was no relationship between having a volunteer manager and the size of the organisation. Volunteer managers also are rarely able to focus only on volunteer responsibilities as these are likely to be only

a small portion of the managers overall role (Brudney 1999). While the evidence of poor management conditions needs to be understood in a context where NGOs generally have poorer pay and conditions than other sectors, (Lyons 1998: 151152), from the available evidence the management of volunteers can be understood as inadequate.

However, do volunteers even want to be managed? It seems the answer is yes (Davis Smith 1996: 196), but that it is the style of management that is important. A small qualitative study of Australian health service organisations with volunteer programs found three distinct styles of management approaches: horizontal, nurturing and managerial (Leonard et al. 2004). This study compared volunteer and manager perspectives, concluding that a flat structure with some elements of nurturing best suited the volunteers (all females with an average age of 57). However, the age and gender of respondents limit the generalisability of the study, which also did not address how such structures work in larger organisations responsible for delivering services (Leonard et al. 2004: 218). However, as an earlier section in this chapter noted, the increasing managerialism and professionalisation of the volunteer environment is problematic in terms of volunteer values and their ability to participate in organisations as active citizens.

Styles of management are also dependent on types of organisations. Advocacy and community type organisations tend to have flatter structures than service or national level organisations, which are likely to be more bureaucratic (Lyons 2001). A study of social service organisations in the UK, found that within relatively large service organisations there were several approaches to interweaving paid staff and community volunteers and groups (Ware 1989: 161166). A revised role with allocated time for collaborating was one approach, volunteer coordinators, and reorganised teams of shared interests others. A core suggestion from the review of the structures was that interaction between professionals and volunteers should be maximised to allow the exchange of skills and resources (Ware 1989: 163).

The main understanding gained from the literature is the limited level of knowledge about volunteer management, and the limited levels of training,

reimbursement and support offered to many service volunteers. Equally, knowledge about different management styles and organisational structures is necessary to understand how organisations can facilitate volunteer involvement and minimise barriers and disincentives. Further understanding needs to be gained of the level and impact of management procedures on volunteers and how volunteers interface with managerial practices.

## **Conclusion – a gap in understanding - study directions**

The need to challenge whether service volunteers have the agency to provide the social and moral benefits that many proponents of volunteerism suggest has been raised in this chapter. More than that, the need for an explanatory theory of volunteering that can account for broader cultural and structural conditions has been highlighted. Several key ideas frame the thinking and discourses on volunteers: volunteers as citizens; volunteers as motivated individuals; and volunteers as agentic networks. What is largely missing from the volunteer discourse is a framework that considers volunteers as workers, and that therefore considers their interactions with service organisations. These ways of thinking about volunteers, like definitions, will influence the volunteer identity work found in ambulance services, as individuals draw on the available and taken-for-granted knowledge in our society.

Policy directions have incorporated this thinking to situate volunteers as a solution to the problems of large governments and lack of social cohesion. However, these policies are based on simplistic assumptions and debates that place volunteers within a space of individualism or collectivism, self-interest or altruism. While neo-liberals and communitarians take different positions on where volunteers sit in these dualisms, both groups objectify volunteers as having the agency to deliver political, social and economic benefits that will balance the dynamics of governments, markets and society. Neo-liberals gained legitimacy for policy changes from a reliance on economic theories of the rational man while communitarians relied on ideas of associationalism and active citizens. These policies however rely on deep and underlying assumptions about volunteers that



influence volunteer identity work and bind the volunteer identity with policy expectations.

A strong feature of the volunteer literature reviewed has been the limited use of critical perspectives to study volunteers and their relationships to powerful cultural and structural contexts. A lack of critique causes ‘blind-spots’ in the volunteer debate. So for example, the linkage of liberal governments to increased service volunteering, while providing support for the concept of ‘government failure’, does not appear to have raised concerns of equity and fairness. If service volunteering arises to fill the gaps left by government, then should there not be significant debate about where those gaps should be, and some thought about who is filling them? The volunteering literature is strangely silent on these issues.

The academic literature that relates to the process of being a volunteer draws on economic, psychological or sociological disciplines and equally generates a myopic view of volunteering that assumes agency. The key concepts of motivation, prosocial behaviour, and social networks have been used to explain why individual’s volunteer and account for a large body of volunteer literature. While this body of literature provides insights into processes that lead the individual to volunteer, it retains an individualist and often utilitarian focus that assumes agency, and does not assist in understanding the cultural or structural factors that may facilitate or limit volunteer agency. Yet, there is some evidence to suggest that resources are a pre-requisite of volunteering, not an outcome and that further studies of structural influences on volunteers are necessary. The recent trend to inter-disciplinary approaches that allows more holistic explanations of how volunteers are influenced by social, cultural and political contexts will begin to fill this information blind-spot, and supports the conceptual framework used by this study.

There is also a dearth of literature that studies how volunteers interface with services or that treat volunteers as a workforce at all. There are though, some indications that managerialism may be detrimental to the agency and satisfaction of the volunteer workforce and that neo-liberal policies have caused a change in the volunteer environment. The reliance on economic theories has meant that

volunteers and their organisations have generally been studied within frameworks that exclude issues of society's norms, and issues of power and equity. Where a critical workforce perspective has been applied to volunteers it found that volunteers may have class divisions that are similar to paid workers and that 'lower class' volunteers can be marginalised. A critical perspective is likely to provide a fertile field for furthering understandings of volunteers as workers.

In summary research approaches to volunteers have had a noticeable utilitarian approach with a strong focus on the volunteer as individual. The pragmatic and managerial focus of many studies rely on positivist methodologies and a focus on *why* questions. A great amount of volunteering research uses a deductive quantitative approach to describe and test hypotheses about volunteering at the macro and micro level. There is little critical reflection on the sector, or the theoretical constructs of these analyses. Of particular relevance to this thesis is the underlying assumption that volunteering represents a pluralist form of power, allowing citizen representation and participation to ensure a vibrant democracy. Social capital has increased the 'rose-tinted glasses' view of volunteering with the focus on the economic, social and health benefits to be gained from volunteering.

There have been recent if perhaps muted critical perspective applied to volunteers which challenge the assumption of volunteer agency by considering the discursive influences that construct volunteers as tools of government. While there is some evidence that governments influence the size and nature of the voluntary effort, it may be that it is the transformation of the *idea* of community and volunteering that has major implications for volunteers and their organisations. The application of a research approach that asks *how* volunteers can deliver the expected policy benefits within a service environment is needed to further the critical perspectives used to date. By framing the study around critical issues of agency, power and equity, the study can work outside many of the assumptions that underpin a large amount of volunteer literature.

The literature has highlighted several issues that form part of the broad social, cultural and historical context of this study of volunteer identity work:

- The extent that broad social understandings of volunteers may be found in volunteer identity work,
- The balance of individual and collective interests in volunteer identity work,
- The hierarchical structures and managerial approaches that make up the formal organisational environment, and
- The influence of service volunteering on the redistribution of resources.

These issues interplay with volunteer agency in the service environment and are an important aspect of a critical evaluation of some key policy assumptions of volunteers. To meet the research aim, to *explore volunteer agency through identity work in health services to inform a theory of volunteering*, this study looks at the case of ambulance volunteers who form a large and important workforce undertaking essential work. This group of volunteers are central to the delivery of ambulance services in rural areas in many parts of the world, including Australia and New Zealand, and therefore provide an interesting case of volunteers embedded in service provision. The following chapter will consider the context of ambulance services and volunteer involvement in services, and brings forward the evidence of volunteer troubles to break through the utopian view of volunteers so common in the literature.

## Chapter Three: The case of ambulance volunteer troubles

*“After three years our station manager does not know my name. After my six month interview I have had no formal interview with management to see how things are going any concerns I have etc... I was told I was in charge of a crew for the first time while on the way to a call by phone without any consultation. I have had no recognition or reimbursement for my time taken for training courses. This year alone will involve five weeks full-time, much of it on unpaid leave from my job. Many of us have to buy our own textbooks (\$400), stethoscopes, thermometers, BP cuffs etc... We have expensive new uniforms, stationery and logos but no decent equipment or pagers. We all feel under appreciated.”*

Anonymous ambulance volunteer (561) SUBC survey.

This chapter introduces the ambulance case by describing the health service context, and then more specifically rural ambulance services and their ‘volunteer troubles’. The historic, social and cultural context of ambulance services grounds the study in the changes and pressures that are affecting the interests of those involved in delivering ambulance services. The details and the context of the phenomena of interest are important in a critical realist study such as this (Easton 2000: 210-212). Therefore a case study approach is most suitable as it should be used when you deliberately want to ‘cover contextual conditions – believing that they might be highly pertinent to your phenomenon of study’ (Yin 1994: 13). Following James Scott’s innovative method of presenting context (1985), the study context will be organised under the headings background (overarching ambulance policy/trends context), middle ground (ambulance service typology) and foreground (ambulance volunteer troubles).

This ambulance case study provided an ‘intense’ example of the phenomenon of interest. ‘An intensity sample consists of information-rich cases that manifest the phenomenon of interest intensely (but not extremely)’ (Patton 2002: 234). Firstly, the large state-wide ambulance services retain a large volunteer workforce, which provided a large and clearly defined volunteer workforce to study. Secondly, ambulance services within Australia and New Zealand provided an intense

example of the trends towards increasing professionalism and managerialism in the volunteer organisational environment. Ambulance services rely on government funding and therefore have levels of accountability to government which is a key factor in the influences of neo-liberal policies on volunteers. The fact that ambulance services are either government or non-government bodies provided additional benefits in allowing access to data from both sectors. Thirdly, the ambulance volunteer workforce is largely a rural workforce, and work in areas where volunteers are often considered to provide the only means with which to deliver rural services. This reliance makes the issue of volunteer workforce sustainability a key issue for ambulance services.

This chapter draws strongly on information gathered during the study *Stand Up and Be Counted: a national strategic planning framework for recruitment, retention and training for Volunteer Ambulance Officers*<sup>5</sup> (SUBC) (Fahey, and Walker 2002). SUBC was an important antecedent to this study, as it was the limitations of the SUBC study that underpinned the development of this studies research questions. The problems that can occur when volunteers are used in ambulance services were uncovered by the SUBC study and are referenced in the last section of this chapter, but SUBC failed to address the theoretical and power issues in the volunteer/ambulance interface, which formed the beginning point of this study.

<sup>5</sup> For the SUBC study, 2,500 surveys were disseminated through the participating ambulance services, with a response rate of 38% (1014). The descriptive research used a random sample survey to gather information on the current situation for ambulance volunteers and to identify matters of importance to them. The survey tool was developed from issues identified in the literature and with the assistance of an advisory committee. An initial Tasmanian study the *More Than a Band-Aid* project was considered a pilot for the SUBC study, and the survey was adjusted according to the new requirements from additional services and lessons learned from the pilot.

To present information about ambulance services in a synthesised and confidential manner I developed a typology that places ambulance services on a continuum of ‘Traditional’ to ‘Modern’, though there is no implication that the future direction of services will continue towards ‘Modern’, or that ‘Modern’ is better than ‘Traditional’. The typology allows me to firstly present common themes that are present in ambulance service structures and operations without providing intricate and unnecessary detail of all the differences. This approach also allows me to maintain some level of confidentiality for the services under study.

## **Background: ambulance as part of the health care system**

This section will provide background information specific to ambulance services in Australia and New Zealand to highlight the key issues impacting on ambulance services and therefore the interface with volunteers. The background context for the study involves the role of ambulance services; policy impacts on ambulance services; other general trends affecting ambulance services; and the rurality of volunteer delivered ambulance services because these contextual matters are pivotal.

### **Ambulance services**

Volunteers have always played a role in health and social services in Australia and New Zealand, and have been particularly important in ambulance services, which rely on a large population of volunteers to deliver rural services. There are around 5000 operational ambulance volunteers within Australia (Australian Government Productivity Commission 2006), and around 2000 volunteer ambulance officers within New Zealand (St John New Zealand 2006). Ambulance services are no exception in experiencing volunteer troubles and I saw some of these problems first-hand through involvement in a study of ambulance volunteers (Fahey, and Walker 2002). Despite a volunteer shortage there was evidence of inadequate training, communication, and organisational support for volunteers across all of the ambulance services studied (Fahey, and Walker 2001a, 2002).

Ambulance services are responsible for providing pre-hospital medical emergency care, retrieval of acutely ill patients, and transportation for people who require

intervention due to accident or illness. Australia and New Zealand have a range of key service providers using volunteers in delivery of ambulance services: St John New Zealand (NZ), Tasmanian Ambulance Service (TAS), St John Ambulance WA Ambulance Service Inc (WA), St John Ambulance (NT) Inc, Queensland Ambulance Service (QAS), The Rural Ambulance Victoria (RAV), Victorian Metropolitan Ambulance Service, SA Ambulance Service (SAAS), Australian Capital Territory (ACT) Ambulance Service, and NSW Ambulance Service. The small urban ACT Ambulance Service and Victorian Metropolitan Ambulance Service do not employ ambulance volunteers (Fahey, and Walker 2002), and therefore were not part of the study, while in NSW a volunteer workforce is the exception not the rule and this service was therefore excluded as well.

Ambulance service models vary because of different funding models, the diversity of rural and urban environments needing services, and because services have evolved from small local organisations. The ambulance services deliver largely state-wide prehospital and emergency services in Australia, but national level services in New Zealand. There are some small variations, such as the use of the Royal Flying Doctor Service in Australia for remote emergency cases, and some rescue and emergency work undertaken by fire departments or state emergency services (Australian Government Productivity Commission 2006: 8.35), but on the whole ten services provide pre-hospital emergency care in Australia and New Zealand, eight of which use volunteers, seven of which formed part of this study.

While ambulance services stand at a nexus between acute and chronic health care their most recognised role is in the provision of emergency health services which, depending on how they are defined, makes up between 60-80% of the incidents they attend (Australian Government Productivity Commission 2006: Table 8A.20). Confusion over whether ambulance services are an emergency health service or a health focused emergency service has left a legacy of poor linkages between ambulance services and the rest of the health system (McGrath 2003: 10). However, Australia and New Zealand have less confusion in this area than for example the United States, and ambulance services are increasingly being recognised as part of the broader health system (O'Meara 2002: 36-38).

## **Health Service Trends**

Ambulance services are affected by key health system trends that are influencing the workloads of paid and volunteer ambulance staff. Of particular relevance to this study of volunteer identity work are increasing funding pressures for services, government deinstitutionalisation and community care policies arising from neoliberal style policies, and an increasing chronic disease management workload linked to the ageing population and early discharge pressures from acute care systems.

Ambulance service demand is increasing globally at around 5-7% per year (Joint Standing Committee on Community Development 2003: 54; Lendrum, Wilson, and Cooke 2000: 7). Increasing demand is an important feature of annually increasing health care costs, ambulance being no exception (Australian Institute of Health and Welfare 2005: Table A1-A4 93-96). As well, neo-liberal policies created an environment of limited funding, which pressured services that were dealing with increasing demands and costs. A parliamentary committee report on TAS stated that 'inadequate funding in the 1990s seriously affected management structures, communications systems, vehicles and equipment, and volunteer training and support' (Joint Standing Committee on Community Development 2003: 4). This situation has seen some reversal during the life of this study, as several services have received increased funding from governments as health care becomes increasingly politicised in Australia (Australian Government Productivity Commission 2006: 8A.28). However, the legacy remains where the cost pressures are likely to have been experienced by most services and are likely to have placed volunteers' interests in conflict with the needs of managers to limit costs. Equally, higher demand is likely to have affected the workloads of volunteers, with resultant consequences evident in volunteer identities.

De-institutionalisation reforms within health care services that devolved more care to the community also created extra demands on ambulance service providers. Both Australia and New Zealand in the 1990s introduced health care policies that devolved responsibility to a more regional level, moving aged care and mental health care away from institutions towards communities (Mulvaney



1998: 262; Swerissen, and Duckett 1997: 24-25). While the theories of normalisation that drove deinstitutionalisation lead many to assume that community based care was preferable, there has been no Australian evaluation of these strategies, but evidence from other countries suggests problems with similar policies in the UK and US (Mulvaney 1998; Rifkin 1986).

It appears likely that deinstitutionalisation policies have failed to account for flow on effects in other necessary services such as ambulance. Siloed funding arrangements for health services prevented planners from factoring in the impacts of deinstitutionalisation ‘down the line’. Anecdotes suggest these impacts include (amongst many others) more ‘difficult to handle’ mental health care cases for ambulance services, and more elderly clients needing frequent transport to hospital (Joint Standing Committee on Community Development 2003). In rural areas such cases pose particular difficulties when hospital is either a long way off, or there are no specialist services to admit the mentally unwell patient. Recent studies suggest that paramedics are poorly prepared for chronic health conditions, with most training focused on life saving treatments (Lendrum et al. 2000), and it is likely that this situation is the same for volunteers.

The increasing percentage of the aged within our society is affecting ambulance services because there are more individuals with chronic diseases living in the community (Australian Institute Health Welfare (AIHW) 2002a, 2002b). An increase in the numbers of individuals living with chronic disease increases ambulance demand (See for example Newton et al. 2006) and also shifts focus from emergency response work. Chronic disease sufferers are less likely to need acute emergency care and more likely to require transport to hospital, or between hospitals (Department of Health 2001). One service model response has been the development of an expanded scope model for paramedics incorporating a greater primary health care role, with an increase in the level of decision making required at the home to limit the numbers of unnecessary transports (Ball 2005; Department of Health 2005; Mason, Wardrope, and Perrin 2003; Snooks et al. 2004). Another response has been to introduce ‘patient transfer’ services within metropolitan areas that can operate with less skilled staff and lower running costs (Baragwanath 1997a; Joint Standing Committee on Community Development

2003). Lower caseloads have meant that this separation of services is not generally occurring in rural areas.

These trends are international, as are the responses of ambulance service redesign, evidenced by several key reports addressing future directions for ambulance services. The *Emergency Medical Services Agenda for the Future* report (National Highway Traffic Safety Administrator 1996) painted a picture of a piecemeal US system, and attempted to provide a cohesive vision for the future of US emergency medical services. In the UK, the report *Review of Ambulance Performance Standards* (Department of Health 2001) followed the National Health Service *Reforming Emergency Care Initiative* (Driscoll, Editors, and Wardrope 2003) which aimed to limit inefficiencies in emergency care by treating the system holistically and by placing the needs of the patient at the centre of system design. The ability to review ambulance services in hand with the whole health system is an advantage that the UK have over Australia, New Zealand and the US where federal/state tensions or private/public competition create discontinuities and inefficiencies.

In Australia, ambulance services are beginning to address service design issues more collaboratively through the Council of Ambulance Services Inc, which has funded studies looking at volunteers (Fahey, and Walker 2002), and rural service models (O'Meara et al. 2006). These studies centre around workforce issues largely because 'workforce' shortages are beginning to affect all health care areas, particularly rural, and because ideas of an expanded scope paramedic role are seen as a solution to workforce problems (Ball 2005; O'Meara et al. 2006).

### **Workforce shifts –from ambulance technician to paramedic**

The movement of ambulance workers from a technical to professional base is another important trend of relevance to the study. Ambulance services as we now understand them, only really began in the 1960s with the development of effective cardiac resuscitation techniques (National Highway Traffic Safety Administrator 1996: 48). Prior to this, ambulance services were largely about rapid transport to hospitals with basic first aiders trained to levels such as the St John First Aid certificate or Bronze Medallion (Willis, and McCarthy 1986: 58). This meant that

at least in the first half of the 1900s ‘ambulance drivers’ were low status, working class health workers, with workers largely drawn from other driving jobs (Willis, and McCarthy 1986: 61). At this time it was unlikely to be difficult to train volunteers to the same standards as paid workers as training requirements were low.

With increased use of technology and the commencement of more intensive life-saving treatments in the prehospital environment, ambulance drivers became ‘ambulance officers’, through the introduction of a new training course in the 1960s that better reflected a paramedical health occupation status (Willis, and McCarthy 1986: 61). Potential industrial problems caused when ‘older, less formally trained officers were suspicious of the new graduates’ (Willis, and McCarthy 1986: 61) were overcome by granting equal recognition to ‘drivers’ of five year standing. After this shift, many services appear to have attempted to bring volunteers either to the same training level or close to the level of the ambulance officer, which is where we find them at the beginning of the 21<sup>st</sup> Century.

By the mid 1980s intensive life-saving developments had advanced so much that in the Australian state of Victoria approximately ten percent of ambulance officers had higher training in areas such as coronary and intensive care, leading to the new category of paramedics (Willis, and McCarthy 1986: 58). The development of the paramedic profession has left ambulance services with two main classifications for ambulance field staff, the ambulance officer and the higher trained paramedics. Volunteers operate at around the level of ambulance officers, of which there are many standards.

While there is little literature or standardisation of these roles, one study found the perceptions of desirable ambulance officer attributes were based on commonsense, manual handling and driving (Kilner 2004: 377). These attributes are likely to reflect the traditional ‘ambulance driver’ role. While there is room for both classifications, in a sense the trend is for a move from the ambulance officer, first clearly identified in the 1960s, to the paramedic professional, a more recent classification.

The differences however, between paramedics and ambulance officers appear to rely largely on differences in technical skills. This is because until recently most paramedic training has been delivered in-house by ambulance services. Only with increasing use of university based curriculum are paramedics expected to gain the independent, reflective and research skills that are the hallmark of professionals (Cooper 2005; Kilner 2004; Lendrum et al. 2000). The professionalisation of the paramedic workforce has meant that higher levels of care can be delivered where paramedics operate, but there has been little consideration about what this means for volunteer serviced populations as the gap in qualifications between paramedics and volunteers widens.

The professionalisation of ambulance paramedics has gathered speed over the life of this study. In 2003 the UK introduced statutory registration for paramedics and an increased focus on the development of primary practitioner type roles (Ball 2005: 896-898). As Ball notes (2005: 898) the evidence base around the piloting of paramedic practitioners is still developing and therefore hard to assess, but it suggests that such a role will work to decrease emergency department admissions and response times. Ambulance services are trialling new work roles and practices in England (Snooks et al. 2005) and Australia (O'Meara et al. 2006).

There are increasing moves to tertiary based training in Australia, away from 'in-house' training with the development of a national university based curriculum for Australia recently approved by the Council of Ambulance Authorities (Australian College of Ambulance Professionals 2005). The professional body, the Australian College of Ambulance Professionals, have shifted focus too, they have developed standards of self-regulation and control and increasingly represents the professional, not industrial, interests of paramedics (Australian College of Ambulance Professionals 2005; Marr 2003: 1; O'Meara 2002: 201).

These are important developments, but so recent that they are not strongly felt, in the field, and are therefore less likely to impact on volunteer services. The situation where paramedics have been trained in-house more accurately reflects the education level of Australian and New Zealand paramedic staff at the time of this study.

The increasing use of technology in medical and transport interventions is also implicated in the rising status of paramedics. Methods such as helicopter transport, drug administration and on-site intubation, has seen the role of ambulance personnel increase in medical complexity and responsibility concurrently with increasingly sophisticated equipment and procedures (Fahey, and Walker 2002). Some of this technology, such as automatic defibrillators and intubation have been introduced into some volunteer delivered services, adding further to the training and accountability requirements for volunteers, but where it is not introduced it increases the divide between paramedic provided services and volunteer provided services.

Increasing complexity of emergency health care and professionalisation of paramedics have placed pressures on volunteers to increase skill standards, and on managers to ensure volunteer standards are adequate (Arbon 1997). These pressures are reflected in the increasing training requirements evident within most ambulance services, which in turn is believed to exclude many potential volunteers (Fahey, and Walker 2002: 8-14). One response has been revival of First Responder (first-aid) services for areas with low demand or where services are struggling to retain adequate numbers of volunteers (Guppy, and Woollard 2000). For, example, there are some innovative First Responder programs being introduced for remote aboriginal communities in parts of Australia. The First Responder is based on basic first-aid with cardio-pulmonary resuscitation skills and automatic defibrillation, and in a sense is a reversion to the original level of volunteer ambulance services. First responders though are not the same as the ambulance volunteers of interest to this study, who are closer to, or equivalent to, ambulance officers. While First Responders are not the subject of this thesis they represent an increase in the variety of emergency responses available to populations, with some areas receiving a lower level of emergency response.

The professionalisation of paramedics is an important context of this study. Professionalisation increases the divide in standards of training and the division of labour between ambulance volunteers and paramedics, and also increases the pressure to increase volunteer standards. However, it is not clear how this is affecting ambulance volunteer identity. While professionalisation in terms of

managerial matters has been highlighted as impacting on volunteer identity in the previous chapter, the increase in the standards between paramedics and ambulance volunteers raises issues around the divisions of labour. Volunteer identity work will provide some insights into how changing standards are affecting volunteers and services, for example, are relations between the two ‘workforce’ groups changing? Is there likely to be more or less conflict with paid staff? More generally, the way that services are including volunteers into the adaptive mechanisms they employ can be understood in part through examination of volunteer identity work, as managers and volunteers work to adapt the discourses about volunteer roles into a coherent volunteer identity.

**Ambulance services in the context of rural health**

Rurality is important to this study as the 7000 Australian and New Zealand ambulance volunteers are largely a rural workforce (See Table 2 for breakdown of numbers per jurisdiction). In the US, ambulance volunteers (called EMTs) service more than 25% of the population (National Highway Traffic Safety Administrator 1996: 20), comparative figures are not available for Australia and New Zealand. It is the role of ambulance services to bring a sick individual together with a health care intervention whilst overcoming the barriers of ‘time and distance from care’ (O'Meara 2002: 47). Rural Australian ambulance services in particular have problems of distance and sparse populations that are experienced by few other countries, while New Zealand has mountainous terrain that can significantly increase time to care.

**Table 2: Numbers of ambulance volunteers per jurisdiction<sup>6</sup>**

State	VIC <sup>7</sup>	TAS <sup>8</sup>	QLD <sup>9</sup>	NT <sup>10</sup>	WA <sup>11</sup>	SA <sup>12</sup>	NSW <sup>13</sup>	NZ <sup>14</sup>
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<sup>6</sup> Numbers taken from Australian Government Productivity Commission (2006).

<sup>7</sup> VIC = abbreviation of Victoria, an Australian state <sup>8</sup>  
TAS = abbreviation of Tasmania, an Australian state

Volunteer Numbers	819	448	575	16	1767	1295	118	2000 <sup>15</sup>
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The level of volunteer involvement in ambulance services is generally directly related to the degree of rurality. Though there are still some volunteer units that service the perimeters of cities, volunteer ambulance officers operate largely in non-metropolitan areas, which can be considered as those areas with populations of less than 100,000 (Hugo 2002: 13). The majority of Australian ambulance volunteers come from towns with less than 5,000 people, though only 47% of New Zealand’s ambulance volunteers come from these smaller towns. Overall less than 10% of Australian and New Zealand ambulance volunteers operate in towns with more than 100,000 people (Fahey, and Walker 2002: 24). The rurality of the volunteer workforce is likely to create administrative difficulties for services that are urban centric and is likely to influence volunteer identity.

**Measures of rurality**

When discussing rurality it is important to define what one means, particularly as there is considerable debate around definitions or rural, regional and remote. It is particularly important to consider urban/rural variables and accessibility/remoteness variables when discussing non-metropolitan populations (Hugo 2002: 13). While two major classifications systems are used in Australia to define rurality: the Accessibility/Remoteness Index of Australia (GISCA 2000); and the Rural, Remote and Metropolitan Areas classification (Australian

<sup>9</sup> QLD = abbreviation of Queensland, an Australian state <sup>10</sup> NT = abbreviation of Northern Territory, an Australian territory <sup>11</sup> WA = abbreviation of Western Australia, an Australian state <sup>12</sup> SA = abbreviation of South Australia, an Australian state <sup>13</sup> NSW = abbreviation of New South Wales, an Australian state <sup>14</sup> NZ = abbreviation of the country of New Zealand

<sup>15</sup> Based on the Stand Up and Be Counted information (Fahey and Walker 20002) as year books do not specify ambulance volunteer numbers)

Government Department of Health and Ageing 2005) these classifications are not relevant to this study. Rurality and accessibility are important contexts for this study, but as anonymity is also important, populations will not be closely defined. The term regional will be used to talk about larger rural towns with populations between 1,000 and 99,999, and the term rural will be used for population centres of less than 1,000. Accessibility will be indicated by using the term remote, for those centres with long times from acute services.

Both the rurality and accessibility of the ambulance volunteer serviced populations are important to the context of this study because of the difficulties they present for services either in providing cost-effective services to a small and rural population, or in adequately servicing a larger but remote population. Accessibility is an especially important concept for ambulance services because it is based on the time to more acute services, which is often of vital importance in ambulance work. For many rural populations the time needed to reach more acute services can be significant. For instance, one case may require eight hours of transport time to escort a patient to a major hospital, hand over, refuel and restock the vehicle and return home (Lennox 2000: 3). The impact of such long time frames for one case on volunteers is not well understood, as there has been no study undertaken on this, but clearly even when caseloads are low, volunteers may contribute significant time to rural services.

### **Health needs of rural populations**

Rurality is also an important context for this study because rural populations are poorer and have poorer health (Australian Bureau of Statistics 2001; Dill 2001). They have higher rates of death to those living in major cities, with a positive correlation to increasing remoteness (AIHW 2005). The excess deaths are largely attributable to higher death rates for indigenous people, and the main causes are circulatory disease (42% of the excess) and injury (24% of the excess) (AIHW 2005: 11-12). Motor vehicle accidents account for almost half of the excess deaths from injury. Death from cardiac arrest in rural areas is also much more likely, as the rapid response necessary to prevent death is unlikely with current systems, and also because paramedics 'have been shown to save more lives' over ambulance



officers (Soo et al. 1999 cited in Lendrum et al. 2000: 10). Figures such as these show both a high need for rural emergency health care and question the sufficiency of current ambulance systems.

Despite, or perhaps because of service closure, the poorer health of rural populations has received increased attention globally since the 1990s, and in Australia has been marked by some significant funding and policy initiatives (not service delivery) (Australian Government Department of Health and Ageing 2006; Humphreys et al. 2002: 3). New Zealand, while lagging behind Australia, has also begun to develop specific rural policies as evidenced by the *Implementing the Primary Health Care Strategy in Rural New Zealand* report (Rural Expert Advisory Group to the Ministry of Health 2002).

Workforce shortages have been another key driver of much rural health research, leading to an interest in new models of delivery for services (O'Meara et al. 2006), and education initiatives that support rural recruitment (Strasser 2002). Increasingly, there are opportunities for rural postgraduate speciality training to address the added complexity of rural practice (Strasser 2002). The role of ambulance services has not been a significant focus of interest to the rural health initiatives, partly due to the past history of poor health system linkages generally. However a handful of researchers have undertaken some work with ambulance services ((Fahey, and Walker 2001a; O'Meara 2002; Tippet et al. 2003), there is a growing awareness of the importance of the role ambulance services have in rural areas (Tippet et al. 2003).

### **Rural versus urban – a question of health care inequity?**

There is an increasing interest in addressing the divide between urban and rural population's health differentials by focusing on interactions between funding and local service needs, and areas of inequitable resource allocation. Volunteer identity work should highlight through changes in discourse, how volunteers are able to position their interests in such a changing environment.

Rural areas have suffered from declining populations and service provision since the mid 1900s, but neo-liberal policies that focused on efficiency before 'spatial

equity’ saw an increase in service closures in the last two decades of the 1900s (Larson 2002: 6). Policy responses to encourage market-based solutions in hand with community development responses while successful in certain cases, require a level of community participation which may not always be forthcoming or indeed possible, and are unlikely to replace the need for public service spending (Larson 2002: 8; Wiseman 2006: 104). There are suggestions of a growing rural policy backlash where rural voters are turning away from ‘conservative’ political parties and are raising the issue of ‘service equity’ in rural areas (Wakerman, and Lenthall 2002: 134).

The 1999 Regional Australia Summit highlighted health issues of importance to rural Australians (Humphreys et al. 2002: 7), three of which are particularly relevant to the concerns of rural service in/equity:

- 1 recognising that rural and remote areas have specific needs with respect to education, training, service delivery and resource allocation;
- 2 models for health service delivery that accommodate variations in community demographics and health needs, underpinned by a skilled workforce; and
- 3 equitable resource allocation for regional, rural and remote communities.

Closer analysis of the funding mechanisms for Australian health services have shown that remote areas are under funded in comparison to urban areas (Wakerman, and Lenthall 2002: 132-134). Some alternative funding models are being piloted based on community involvement in needs assessment and care planning, for example, the Primary Health Care Access Program, and Multipurpose Centres (Australian Government 1998). These models incorporate the ‘new thinking’ around community participation, underpinned by the growing belief that rural communities need to be involved in decision making about health services.

Such thinking is emerging within ambulance services too and O’Meara (2003) promotes it in a theoretical Community-Volunteer Model of ambulance service delivery, the strength of which ‘is derived from a belief that the community itself

is taking responsibility for the provision of its own emergency prehospital care (2003: EJ). O'Meara (2003) does not ignore the potential difficulties in such approaches, and is of the opinion that because culture drives such models, it is the local culture that will create either desirable or undesirable outcomes. Desirable outcomes will be achieved if communities have the capacity to support such services, but equally, poor local leadership could have very negative effects on such services.

There is some limited evidence of the negative effects of poor leadership and internal conflict within local volunteer ambulance services (Fahey, and Walker 2002; Reich 1991), though generally discussion of such issues are difficult to find. Scrimgeour (1997 cited in Wakeman, and Lenthall 2002: 137) adds further cautions on the capability of community reliant services in relation to Aboriginal health services, claiming that remote communities have limited access to managerial skills and that they need to make decisions about most services, diminishing the effort that may be available to focus on health services. It may be that this caution should be applied more broadly to small rural communities where the capacity for community participation may become stretched across too many services.

In terms of community perceptions, ambulance services are highly valued by rural communities, rated just after doctors and hospitals in terms of importance (Humphreys and Weinand 1991 cited in O'Meara 2002: 42). This valuing of ambulance services suggests that communities if able, will work to establish them, or fight to keep them if threatened. Recent moves to change ambulance resource allocations are encountering such community efforts.

As some rural areas de-populate and others on the coast re-populate, changing the resource allocation has proved to be politically difficult for ambulance services. With many small hospitals closing, efforts to remove or wind back emergency services have led to community protest in several cases. In New South Wales for instance, many areas remain over-serviced with permanent paid crews, while other areas with growing populations have limited access to ambulance services. Efforts to address such inefficiencies have met with resistance from unions and

communities, while efforts to replace paid services with volunteer services have met with community apathy in some cases (O'Meara et al. 2006). Some areas have had more success in re allocating resources, O'Meara (2002: 184-185) found that Rural Ambulance Victoria, which had begun to address such anomalies in the late 1990s, had an allocation of resources that better reflected community population size by the early 2000s. In general, resource allocation is an area that is in flux in rural ambulance service, with most services attempting to move away from a historical basis for funding to more flexible needs based models. Shifting resources directly affects ambulance volunteers, because of perceptions of their role as cost-saving workforce.

A well accepted but infrequently voiced understanding within ambulance services is that the potentially high cost of providing rural and remote services means that volunteers provide the only means with which to deliver rural services (See for example Joint Standing Committee on Community Development 2003: 36). While apparently commonsensical, cost-benefit analysis justifying the use of volunteers in rural ambulance services are not in the public domain.

Comparing figures published in the *Report on Government Services* (Australian Government Productivity Commission 2006: 8A.24) shows that non-government services with a high quota of rural volunteer services cost governments far less than other service models. Western Australia, occupies a third of the Australian continent, but only 10% of the population. Many areas are therefore sparsely populated (Australian Bureau of Statistics 2006). WA has the highest use of ambulance volunteers (1,767), and receives the least government funding per head of population of all Australian ambulance services. In 2004-05 tax year they received government funds of \$9,737 per 1,000 people compared to \$32,502 for SA and \$44,875 for Vic (Australian Government Productivity Commission 2006: Table 8A.28). Equally WA spent far less per head of population than the other ambulance services (Australian Government Productivity Commission 2006: Table 8A.27). Clearly a non-government agency with a high use of volunteers can provide a cheaper service.

But how does a cheaper service affect the quality of service? Quality of ambulance service is difficult to measure as there are few indicators other than ambulance response times. Getting to emergencies ‘in time’ to prevent death or permanent harm has long been a key objective of ambulance services. This has led to a focus on ‘response time’ as the major performance measure, which is the time between the emergency call and getting to the patient. Response time, while an important measure, is often poorly measured or not reported at all for rural ambulance services (See for example Australian Government Productivity Commission 2006). More recently services have recognised that an exclusive focus on response time limits the ability of both ambulance services and the serviced communities to measure standards of care (Baragwanath 1997b: 23). There have therefore been efforts to measure health care outcomes such as ‘survival rate’ and patient satisfaction (Spaite et al. 1999), though these data are to date limited and not well standardised.

Using the ‘Survival rate from witnessed out-of-hospital cardiac arrests’ measure, WA has the poorest ambulance service outcomes with only a 14.3% survival rate compared to 35.4% from SA and 31.3% from VIC (Australian Government Productivity Commission 2006: Table 8A.23). The figures are taken from cases where resuscitation was attempted and the scene was witnessed by bystanders over 16 years of age, and the survival relates to the patient having vital signs on arrival at the hospital. These figures suggest that there could be serious service equity issues for populations serviced by high numbers of volunteers, though further study would be needed to determine the relationship as distance to hospital may account for all of the discrepancy. In general, there is little direct discussion of ambulance service equity issues in the public domain.

Issues linked to rurality and remoteness are important for this study because despite health differentials it seems likely that a difference in standards between metropolitan services and rural services exists. It is important to understand how volunteers can be sustained in a rural environment to a level that provides satisfactory standards and equitable health care for rural populations, which so evidently have extra emergency health care needs. Volunteer identity work will reflect some of the negotiations over interests and standards that are occurring at

the interface of volunteers and ambulance services, which may help to develop better systems.

In summary, some major trends and historical facts are affecting the ambulance services. The work role is moving from a first-aid emergency technician, the ambulance officer, towards an autonomous health professional, the paramedic. Workloads are increasing and are likely to involve more chronic disease management due to the ageing population and de-institutionalisation policies. At the same time ambulance services are under the same cost-pressures as other health services, with rising costs and fund limiting neo-liberal policies. These changes make it both more difficult to use volunteers, and yet more important to maintain volunteer services as a cost-saving workforce. Of interest to this study is how the volunteer identity works to change, adapt to, or resist these pressures.

### **Middleground: a typology of ambulance services**

In the last one hundred years Australian and New Zealand ambulance services have changed from small local and regional organisational enterprises into larger state based organisations. This section describes in more detail the resulting variations in ambulance services as a typology, particularly in respect to matters that affect volunteers. This middle-ground context provides the local level discourses that will be used in negotiations in the workplace. The ambulance systems and structures will be both reflected in volunteer identity, but also constructive of volunteer identity as they contribute to the parameters that construct the volunteer subject. They will also be liable to change as volunteer identity changes, though whether the change meets volunteer interests, paid staff interests and/or management interests will depend on the collective agency of each group.

Volunteer delivered ambulance services have grown from small local groups operating under the banner of the St John Ambulance Association founded in England in 1877, (St John New Zealand 2006), to become increasingly professionalised organisations with a mix of paid and volunteer staff. Funding arrangements vary between services, but all rely in part or whole on government funding with most also receiving private funds from subscriptions and private

health insurers (Australian Government Productivity Commission 2006: Table 8A.19). In Australia's federal system, ambulance is a state government funding responsibility and most services are the responsibility of the local state health service minister. In New Zealand, ambulance services are all non-government organisations that rely heavily on financial support from government. St John Ambulance provides 80% of New Zealand's ambulance services, with several other smaller operators providing the rest (St John New Zealand 2006).

While most of New Zealand's services continue to be delivered by St John New Zealand, Australia's have mostly been replaced by state-based public bodies. Now only Western Australia and Northern Territory services remain as nongovernment organisations (See Table 3).

**Table 3: Relationships of primary ambulance response and management organisations to government**

Ambulance Service	Governance structure
Ambulance Service of New South Wales	Statutory authority reporting to the Minister for Health
Rural Ambulance Victoria	Statutory body reporting to the Minister for Health
Queensland Ambulance Service	Division of the Department of Emergency Services, reporting to the Director-General
WA St John Ambulance	Incorporated not-for-profit organisation under contract to the WA Government
SA Ambulance Service	Incorporated Association, but a state government responsibility under the Minister for Health

Adapted from Source (Australian Government Productivity Commission 2006: Emergency Services 8.7)

Table 3 demonstrates variations in the relationships between ambulance services and governments but this is only one area where ambulance services vary. Variation makes comparisons and generalisations between services difficult (Australian Government Productivity Commission 2006). The development of a typology to report and discuss information about the seven services that were the focus of this study was seen as a sensible solution to the difficulty presented by ambulance service variation.

Maintaining confidentiality presented another challenge that was answered by developing a typology of ambulance services. Ambulance services do not have a strong research culture and are often publicity averse (National Highway Traffic Safety Administrator 1996; O'Meara, Burley, and Kelly 2002). In hand with publicity shyness, the field of ambulance is small, and there are only eight organisations within Australia and New Zealand that employ ambulance volunteers. Therefore, it was important that confidentiality was provided to ambulance services as far as was possible to preserve the emerging willingness of services to engage with service research. This approach fitted with Yin's (1994: 144) compromise strategy of naming the participating organisations, but not attributing any particular results to any one service.

The following typology describes ambulance services as ideal types to help blur the particular services characteristics and to allow some generalisation and comparison (Yin 1994: 143-144). Services are viewed on a continuum that begins with organisations that remain fairly true to the original St John Ambulance Association service. These will be discussed here as 'Traditionals' placed at the beginning of an ideal type continuum. At the other end of the continuum are those organisations that are more centralised, state-run and have employed non-ambulance management staff. These will be discussed as 'Moderns'. In between, sit services, both non-government and government bodies that have variously moved away from a Traditional ideal type but do not have all the features of the 'Moderns', these are called 'Nearly Moderns'. For brevity, these terms are used throughout the thesis. The typology is not meant to imply that all services are moving towards becoming 'Moderns', or even that 'Moderns' are the better model



of service provision, but only that this typology was relevant for the organisations and matters of interest to this study, at the time of the study.

‘Traditionals’ have retained many elements of the early Australian ambulance services developed under the St John Ambulance umbrella. Ambulance services were started by local volunteers groups, though in larger metropolitan areas they were quickly backed up with some paid staff. While initially little more than a first aid transfer service using litters, horse and cart, and later motorised vehicles, the St John Ambulance Association structure provided a structure that linked local groups into international bodies that focused on first-aid and health care (St John New Zealand 2006; Willis, and McCarthy 1986).

Training has long been part of the history of ambulance. Training is a fairly ‘fixed process with a clearly defined beginning and end’ (Cooper 2005: 379). But the legacy of ambulance services’ local level origins is a diversity of training requirements and certifications. Certification is unique to each jurisdiction, though services are moving towards national certification systems (Fahey, Walker, and Lennox 2003). Ambulance services set their own training standards and have historically provided their own training, leading to variation in training courses and standards. This is not unique to Australia and New Zealand, in the US 40 different levels of ambulance technician certification were identified (National Highway Traffic Safety Administrator 1996: 20). The UK has the most standardised classification (though not training) of ambulance technicians, requiring around 3-4 months in-house training and 12 months internship (Cooper 2005: 375). There is no consensus on which volunteer training approaches are better or more sustainable, but external pressures have gradually seen most services increase requirements, particularly over the last decade.

‘Traditionals’ rely on a more didactic, task and skills focused style for delivering training, and have less requirements in terms of training time and written work. At the most basic level, volunteers must complete about sixty hours of training to qualify as an ambulance officer for one ‘Traditional’ service. There may be strong cultural support for the traditional skills focused approach. A UK study found that practical skills based training for ambulance officers matched the beliefs of

interviewed stakeholders (Cooper 2005: 376). It is possible that this practical focus may be evident in ambulance volunteer identity.

‘Moderns’ however, have moved to nationally accredited courses equivalent to one year full-time study, within nationally accredited frameworks. At this end of the spectrum, volunteer ambulance officers attain the same qualifications as paid ambulance officers, though still distinct from paramedics. In between ‘Traditionals’ and ‘Moderns’ lie a variety of in-house training regimes of varying length, but generally focused on emergency skills.

All services have reaccreditation requirements generally involving ongoing regular training attendance, being ‘active’ on the roster, and bi-annual skills checking. Studies have shown that paramedics and volunteers appreciate such skills checking (Cooper 2005: 377; Fahey, and Walker 2002: 42). As mentioned previously advancements in pre-hospital medical emergencies such as cardiac arrest and asthma have had an impact on the training and skill requirements of ambulance volunteers. For example, the introduction of semi-automated defibrillators means that volunteers can defibrillate patients in the field, but equally they are required to undertake extra training and regular reaccreditation in order to safely use the equipment.

The ambulance services generally have regional divisions, and have a history of hierarchical, almost military operations (O'Meara 2002: 38; Willis, and McCarthy 1986). This is likely to be a cultural ‘hangover’ as the military origins of ambulance date back to the Napoleon’s army in 1797 (National Highway Traffic Safety Administrator 1996) and the origins of the word ‘volunteer’ are in those who freely signed up for military service (Harper 2001). Most of the ambulance services have governance structures that Lyons (1997: 126) calls the ‘corporate management model’. There is an elected Ambulance Board, which appoints a Director or Chief Executive Officer, and a layer of executive management. Underneath this management layer are middle-managers, where regional managers supervise district or area managers who supervise team level coordinators, who in turn manage volunteers. In all services, clinical managers are drawn from paid ambulance staff, some of whom were once volunteers.

In 'Traditionals' most layers of management are likely to have been promoted up from the ambulance field work, and retain a strong hierarchical focus. A similar trend was identified in UK and was seen as problematic because it led to poor organisational leadership and management, where for example, urgent business was allowed to override important business (Department of Health 2005: 16-17). 'Moderns' however, are more likely to have employed specialist management staff with management backgrounds and training.

'Traditionals' retain elements of the St John Ambulance structure, with local area ambulance committees having representatives on larger regional ambulance committees, who are then represented by a larger state-based committee. The relevance and power of these committees varies, but they are largely advisory bodies. 'Traditionals' however, allow reimbursement and support policies to be set by local area committees and use a centralised system to set service standards, though this approach is generally in decline. 'Moderns' have centralised administrative and policy level decisions, being delivered from metropolitan centres, though over the life of this study they appear to be moving to a more devolved model of centralised policy but regional administration.

Apart from training, services support volunteers with infrastructure and reimbursements (Fahey, and Walker 2002). All services provide uniforms, but have different levels of provision. 'Moderns' provide full uniforms, 'Traditionals' are likely to expect teams to share certain items such as wet weather gear. Reimbursement of expenses is an area of great diversity. Most services reimburse petrol for certain types of travel, though rates and criteria for re-imbursement can vary greatly, which provides an interesting point for discussion further in the data. Phone calls are generally reimbursed for those in administrative type roles, and meals needed while attending long transport cases may be suitable for reimbursement also. 'Moderns' are more likely to reimburse some elements of training. 'Traditionals' have a strong local focus, at one extreme requiring local communities to raise funds for ambulance stations and vehicles before commencing services in an area and also allowing local committees to set reimbursement allowances. This local policy setting means that differences in

reimbursement rates and criteria can occur not only between services, but also within services.

In many services there is some blurring of the lines between paid and volunteer staff which is likely to require identity work by both parties to negotiate interests. Some 'Traditionals' and 'Moderns' occasionally offer casual positions to volunteers. This is more likely in services where volunteers are classified using the same system as that for paid staff, meaning that base-line training requirements are the same. In other services, a completely separate classification system exists for volunteers, with completely different training (Fahey, and Walker 2002). In one such 'Modern' service, volunteers are paid for call-out time but not on-call time (Australian Government Productivity Commission 2006: Table 8A.21). This payment can be seen as an extension of the better reimbursement policies of 'Moderns', though common definitions of volunteers would preclude the inclusion of this group in a volunteer study at all<sup>16</sup>. It is possible that blurring of roles between paid and volunteer staff is implicated in conflict between paid and volunteer staff, which is an identified problem in volunteer-involving organisations (Baldock 1990: 73; Fahey, and Walker 2002: 33). Conflict is further discussed in the next section on volunteer troubles.

In summary, 'Traditionals' and 'Moderns' have several areas of key difference which are likely to impact on volunteer identity work. 'Traditionals' retain a strong local focus with promoted clinical ambulance service managers, but 'Moderns' have moved to more centralised governance structures using management specialists at executive level. Training has a central focus, but is inhouse and task and skills based at the 'Traditional' end of the spectrum, and provided externally to a national standard, with higher time requirements at the 'Modern' end of the spectrum. Reimbursement and other support show great

<sup>16</sup> As call-out payments were the only difference with other volunteer groups, they have not been excluded in this study.

variety; ‘Traditionals’ are more likely to have a local level financial management for reimbursement and equipment.

The typology allows comparison and generalisation within the study and allows differences in services to be seen as trends over time. This will facilitate discussion of identity work in terms of these generalisations, without needing to identify specific services. As this chapter highlights, ambulance services parallel many volunteer services in that they are increasingly centralised and professionalised. The identity work that is occurring within ambulance services will show how volunteers and others are negotiating interests in this changing environment.

### **Foreground: ambulance volunteer troubles**

This section details the study foreground that is the ‘volunteer troubles’ experienced at the interface between volunteers and ambulance services. This section will link volunteer troubles in ambulance services to the broader understanding of volunteer troubles discussed in the literature review. As well, the likely role of volunteer identity work in negotiating around issues of volunteer troubles and expectations at the ambulance service interface will be flagged.

While difficulties in the recruitment and retention of volunteers cause problems for service managers and are the focus of most ‘volunteer troubles’ literature (Emergency Management Australia 2003b; Grube, and Piliavin 2000; Zappala, and Burrell 2002), some authors have highlighted the problems experienced by volunteers in services (Fahey, and Walker 2002; Noble, and Johnston 2001; Warburton 2004).

*That the value of volunteering has largely been overlooked for so long belies its significance. The low status of volunteering has resulted in inadequate understanding and support mechanisms, as well as injustice to past and current volunteers who have pioneered many essential services and contributed to beneficial social change. Volunteers have often been taken for granted, their potential has not*

been maximised and volunteering has, on occasions, been reduced to *a cheap form of labour*. (Noble, and Johnston 2001: 152)

However, as the review of the literature highlighted, this overlooking of volunteers has shifted with an increasing interest in their value as active citizens and service deliverers. Pressures for increasing accountability and professionalisation in government and non-government services have begun to focus attention on a widespread under-management of volunteers (Brudney 1999; Reinholdt, and Smith 1998). Despite the important role that volunteers play in allowing ambulance services to extend limited budgets and to provide services in areas that would otherwise not be viable, this under-management has also been a feature of ambulance services (Fahey, and Walker 2002).

Troubles exist for both volunteers and service managers, and solutions are inevitably tied up with the work of managers. So while managers are not the focus of this study their actions and role have a major impact on the volunteer workforce. Managers have causal capacities that are directly related to systems that co-ordinate and control resources (Tsoukas 2000: 37). Managers are responsible for maintaining organisational functions and service delivery, in hand with strategic planning to support a system for controlling resources...’ (Tsoukas 2000: 37). Therefore the key functions of managers are based on the real socioeconomic world of competing interests and limited resources (Tsoukas 2000: 38). While the interests of volunteers and managers may overlap, in many cases they will be in conflict. ‘In the world of work, there are recurrent struggles over the question of whose purposes, or interests, work (production) is to serve – owners, managers, producers, consumers?’ (Alvesson, and Willmott 2003: 13). Hence managers are likely to see volunteer troubles quite differently to volunteers and to often be in a situation of conflict with the volunteer workforce.

Following Foucault (1991a; 1991b), managers are likely to use volunteer identity as part of a range of practices to control and elicit co-operation from volunteers. A critical realist study such as this should link management strategies with their causal powers situated within the organisational and broader contexts (Tsoukas 2000: 39-40). Evidence of volunteers’ troubles suggests that generally ambulance

service managers did not focus a great deal of time and resources on volunteer troubles in the 1990s (Fahey, and Walker 2001a, 2002). However, increasing difficulties in recruiting adequate numbers of ambulance volunteers to deliver services in rural areas has seen more interest in looking at volunteers' experiences of ambulance services.

Services have begun to improve training resources, to review policies, and to generally focus more attention on volunteers in order to maintain the co-operation of a volunteer workforce. The increasing focus on ambulance volunteers and service changes are part of the context of this study, but it must be remembered that ambulance services have invested in volunteers to different degrees.

The International Year of the Volunteer in 2001 provided an impetus for many organisations to focus on volunteers. Emergency Management Australia (EMA) used the year to generate some broad level activity to address the shortage of emergency service volunteers. EMA hosted a series of conferences (Emergency Management Australia 2001, 2003a) and provided research funding to support Australia's half million emergency service volunteers (Emergency Management Australia 2003b). Health bodies also joined a focus on volunteers evidenced by reports such as *Working With Volunteers and Managing Volunteer Programs in Health Care Settings* (Commonwealth of Australia, and Volunteering Australia 2003) and recurrent funding for community visitor schemes for the aged in residential care (Commonwealth of Australia 2005). In 2001/2002 EMA funded the SUBC research project that surveyed volunteer ambulance officers from all Australian and New Zealand ambulance services. The study uncovered an under-management of volunteers similar to that found in other studies such as inadequate resourcing, and poor communication mechanisms.

### **Lack of information about the volunteer workforce**

Research and management of ambulance volunteers has been hampered by a lack of information about the volunteer workforce. This lack of information has been shown in several studies, for example, in a survey of thirty-five Australian

emergency services, the majority were unable to provide details of the male to female volunteer ratio, nor demographic details of the volunteer workforce over the previous decade (Reinholdt, and Smith 1998: 36). Most ambulance services participating in the SUBC project also had very poor data records on their volunteer workforces (Fahey, and Walker 2002). This lack of information can be understood as a significant impediment to the strategic planning capacities of ambulance managers (Reinholdt, and Smith 1998). Aside from the management implications there are interesting implications for a broader collective volunteer identity. For example, lack of information about the demographic characteristics while making strategic planning difficult, would limit the ability of ambulance volunteer to conceive of a broad collective identity.

In Australian and New Zealand ambulance services women accounted for 55% of ambulance volunteers (Fahey, and Walker 2002: 23). This gender balance sets this group of volunteers apart from the volunteers in Baldock's study (1990) who were predominantly female, and made a feminist perspective redundant for this study. Most ambulance volunteers (60%) were aged between 30-49 years of age, with only 7% of respondents aged over 60 years and 4% aged between 18-24 years (Fahey, and Walker 2002: 23). Most volunteers were married or partnered (81%) and had dependents (54%) (Fahey, and Walker 2002: 23). Most volunteer respondents were employed, 54% full-time, and 29% part-time. The ambulance volunteer workforce was largely regional and rural with most respondents from towns with less than 5,000 people (64%). A third (33%) of ambulance volunteers also volunteered for a second emergency service suggesting a very 'active' group of citizens (Fahey, and Walker 2002: 23-24). Generally, ambulance volunteers fit closely with Australian volunteer demographics (Australian Bureau of Statistics 2000), though the average hours of service are greater amongst ambulance volunteers (Fahey, and Walker 2002: 26-27) and education levels were lower with the largest group (36%) having completed high school (Fahey, and Walker 2002). In broad terms the rurality, lower education levels and higher time commitments of ambulance volunteers were key factors that separated them from the average Australian volunteer (Australian Bureau of Statistics 2000).

### **Inadequate Volunteer Numbers**



While most suggestions of a shortage of volunteers are anecdotal (Sharp 1989: 48), and an apparent direct contradiction with the most recent indications of a general increase in volunteer numbers (Australian Bureau of Statistics 2000), a 'volunteer drain' of ambulance volunteers has been noted in the US (Fitch 1994: 39; Sharp 1989: 48) and in Australia only 4 of 35 surveyed organisations were satisfied with current volunteer numbers and all the rest felt under-resourced (Reinholdt, and Smith 1998: 37).

Australian and New Zealand ambulance services also had problems with maintaining adequate numbers of volunteers and in keeping them long enough. While volunteers remained with ambulance services for an average of 2.5 years, only 32% of respondents indicated that they 'always had adequate roster cover' (Fahey, and Walker 2002: 33-34). An inadequate roster cover supports the idea that rural ambulance services are having difficulty recruiting volunteers but also that they may be operating in a sub-standard manner. Additionally, some volunteers appear to be covering rosters above and beyond the amount of time they wish to donate (Fahey, and Walker 2002: 32) thereby challenging the very identity of ambulance volunteers as free agents. Again such issues are not addressed in the available literature.

Volunteer recruitment has been a major management focus for many emergency service managers to maintain an adequate workforce (Connery 1990; Federal Emergency Management Agency 1995; Morisey 1993; Reinholdt, and Smith 1998). Despite this, less than a quarter of the organisations studied by Reinholdt & Smith (1998: 41) had researched recruitment. The research undertaken had mainly focused on finding new recruiting ideas and made little effort to link to broader volunteering knowledge such as motivations. Overall, the lack of research by emergency services in the area of motivation and recruitment is notable.

Ambulance volunteer motivations fit patterns seen within other studies (Aitken 1999; Fahey, and Walker 2002; Reinholdt, and Smith 1998: 32-33). On a five point likert scale 'assisting the community' was the motivation listed by a majority of volunteers (77%) as very important; followed by 'learning new skills' (65%) and 'gaining a sense of achievement' (59%) (Fahey, and Walker 2002: 29).

Responses reinforced the idea that no one motivation guides volunteers, and reflected findings from other motivational studies (Aitken 1999; Australian Bureau of Statistics 2000). Theoretical frameworks of motivation were discussed in the last chapter, but of relevance to this section is the consistency of motivation findings. Within a framework where discourse and identity are both constructing and being constructed, the strength of motivation discourses should raise questions about accepting simple phrases. What is meant by ‘assisting the community’ for example, and do catch-all terms such as this become self reinforcing?

The frequent recruitment of volunteers is not the only method for dealing with the lack of volunteers and attention is moving to the need to retain volunteers within ambulance services (Fahey, and Walker 2002; McDowell 1999; Sharp 1989; Steiner 1997). The *Review of the South Australian Ambulance Service* (Lizard Drinking Business Solutions 2003), a privately commissioned report, took an overall view of SAAS, but of particular relevance to volunteers were the observations that SAAS needed to act swiftly to retain volunteers, and recommendations that activities aimed at improving conditions for volunteers needed to be upgraded and intensified. The report suggested that the volunteer workforce was under threat and that sustainability depended on improved service support for volunteers (Lizard Drinking Business Solutions 2003).

Rewards are some of the key retention strategies proposed by management advocates (Federal Emergency Management Agency 1995; Sharp 1989). Rewards are considered a key method for managers to gain the co-operation of their workforce (Tsoukas 2000: 39), and to increase the retention of volunteers (Federal Emergency Management Agency 1995).

In relation to a volunteer workforce rewards have problematic complexity. The divisions between reimbursements, incentives and payment are not clear, and the recent focus on volunteers receiving reciprocal benefits (Commission for Social Development 2001; Cordingley 2000) has contributed to a blurring of these boundaries. For example, The United Nations Volunteer Program definition stated that volunteering ‘benefits both the volunteer and the person or party whom their

action is meant to aid.”(Commission for Social Development 2001: EJ). Exchange and reciprocity are included in the definition to challenge the identity of volunteers as charity workers, and to prevent exploitation of the volunteer workforce (Cordingley 2000). However, the view that volunteering is always reciprocal can hide or dilute the cost of volunteering (Noble 2000: 157).

### **The Costs of Volunteering**

Rewards and incentives range from economic payment to public recognition. As discussed in the previous section services provide diverse forms of reward and remuneration, the most common reimbursements for ambulance volunteers being phone calls; travel costs; meals; injuries; postage; training, and uniforms (Fahey, and Walker 2002: 8-14; Reinholdt, and Smith 1998: 46). Incentives are less likely to be offered in Australia and New Zealand, but in the US can include items such as insurance schemes, participation-based compensations, and rebates for council rates (Federal Emergency Management Agency 1998: 47-48; Hudgings 1988: 6061; Swan 1991a)).

While reimbursement is recognised as a retention strategy, further understanding needs to be gained of which reimbursements are most valued, the most accessible and the impact of reimbursement policies on the volunteering ethos (Reinholdt, and Smith 1998: 50). The re-imbursement of expenses increases the accessibility of those with lower socio-economic status to the benefits of volunteering (Ellis 1997: 29), and yet in Australia in 2000 only 25% of volunteers were reimbursed for expenses (Australian Bureau of Statistics 2000: 22). The ‘cost’ of volunteering can be a negative, with expenses for training, fuel and food being significant costs for volunteer ambulance officers (Fahey, and Walker 2001a). Reimbursement of expenses may be particularly important in rural area where travel distances and fuel prices are likely to be high (Flick et al. 2002: 12). With increasing competition for volunteers, organisations are increasingly interested in removing the negatives for volunteering (Aitken 1999; Emergency Management Australia 2001: 8). While reimbursement of expenses is inadequate in some organisations, in others there are moves to compensate volunteers for their time.

Some services pay volunteers to ensure a continuing supply of skilled labour (Russell and Scott 1997 cited in Flick et al. 2002; Wolfberg 1998) and others, such as Australian Volunteers Abroad contribute to basic living costs for volunteers (Paull 1999: 26). Two Australian ambulance services, Queensland and Victoria, have some limited payment of ambulance volunteer time (Fahey, and Walker 2002). While some volunteers dislike the idea of payment others desire it. A consultant's report prepared for the Country Fire Authority found that up to 20% of volunteers (largely younger) felt they should receive some payment for their services (Bergent & Co. Pty Ltd 1993).

However, there are arguments against paying volunteers (either for their time or with incentives), which rely largely on the idea that it may alter the culture of volunteering, and that it will adversely affect the organisations that rely on volunteers. As identified in the first chapter, volunteers are strongly defined by the concept of altruism and some argue that payment would spoil the 'altruistic' drive of volunteers, lower the value of their contribution into that of low paid workers, focus attention on finances and drive out the altruistic others (Turner 2004: EJ). This argument hinges on the belief that the introduction of payments turns the community interests of volunteers towards private interests, which ultimately undermine the original community focus of providing a public good (Brennan 1989: 193). These arguments are theoretical and are not based on available research evidence.

As well, there are concerns about the financial impact reimbursement policies may have on organisations. Because volunteer involvement is based on the premise that organisations can extend a limited budget, or provide services that would otherwise not be viable, changes in reimbursement policies may lead services to become unsustainable (Howard 1999). However, the small amount of literature that deals with the cost-benefit ratio of volunteering identify that volunteers still provide good value for money, often returning around six to eight times the value that is spent on them (Browne 2000: 28; Handy, and Srinivasan 2002; Hollander, and Chappell 2002 Swan 1991b). Ambulance volunteer

contributions to Australia are estimated to be worth between \$29 million to \$90 million annually<sup>17</sup> (Fahey, and Walker 2002: 26-27). Few services record or estimate contributions from volunteers, and there is no standardised method for measuring economic contribution (Fahey, and Walker 2002).

The Volunteer Ambulance Officers Association of Tasmania however, has estimated that Tasmanian ambulance volunteers save the Tasmanian Government and community \$6 million per annum, and claim that this contribution is undervalued and that volunteers do not receive a fair share of ambulance funding (Volunteer Ambulance Officers Association of Tasmanian 2000). Similar claims have been aired in New Zealand and the United States (Annison 1996: 4), though there is generally little debate around such issues. For example, the report *Emergency Medical Services Agenda for the Future* (National Highway Traffic Safety Administrator 1996: 20) while identifying that volunteers provide over 25% of the services in the US, comments only that ‘the value of their contribution is immeasurable’. *Prima Facie* this would appear to be an inadequate state of affairs for planning any service. A recent study has released results of a survey of Australian emergency service volunteers that identified the average annual, direct cost to volunteers of providing services was \$544 per volunteer (King et al. 2006: 5).

While some authors raise awareness of the issue of equity in the matter of costs to volunteers (Flick et al. 2002: 78-79; Reinholdt, and Smith 1998; Warburton, and MacDonald 2002: 46), it is generally a noticeable omission from the reward debate. It seems the issue of reimbursement has been driven by the problematisation of recruitment and retention, not by concern for the costs to volunteers.

<sup>17</sup> The SUBC survey asked respondents to estimate the hours volunteered per month for ambulance services; broken down into hours training, hours on-call, hours on call out and hours of administration. While such estimates are likely to be highly flawed in terms of respondent recall and rounding up of numbers, and were contentious, they did provide a point of focus for economic estimates and provided information that was not available in other form.

## **Inadequate Organisational Support for Volunteers**

The ‘under-management’ of volunteers, poor understanding of the best styles of volunteer management, and the effect of organisational structures on volunteers were highlighted in the previous chapter. While ambulance services are unlikely to move away from a hierarchical organisational structure they can change the level and style of volunteer management.

Ambulance volunteers indicated on a five point likert scale that the most valued management support was: a supportive and available management contact person (49% very important), receiving training certificates (37% very important) and the opportunity to provide feedback to management (30% very important) (Fahey, and Walker 2002: 37). Qualitative components of the SUBC study highlighted that ambulance services did not perform well in these and other matters. For example, comments such as *‘training for 1 year but don’t know if volunteer ambulance officer yet – no certificate or confirmation’* highlighted problems with receiving training certificates and that processes did not necessarily fit the reported service policies (Fahey, and Walker 2002: 39). The qualitative comments also suggested significant problems with the style of ambulance volunteer management, suggesting an excessively ‘top-down’ approach generally, which impacted on volunteers negatively when managers (at several levels) lacked interpersonal skills (Fahey, and Walker 2002: 38-39).

The SUBC study asked volunteer respondents to list three key factors that make volunteer work difficult and the responses were themed (Fahey, and Walker 2002: 33). Time commitments were listed 587 times and represented 38% of the answers. But poor relationships were the next most commonly listed difficulty, mentioned 174 times. Four other key difficulties were themed around ‘lack of organisational support’ (118 responses), ‘inadequate provision of resources’ (113 responses), and isolation issues such as lack of training and professional support (105 responses). It could therefore be said that in ambulance services the volunteer/service interface troubles volunteers in terms of both management style and function.

## **Training Pressures**

Emergency and health services such as ambulance expect high levels of training of their volunteers (Reinholdt, and Smith 1998: 44). As noted previously, training is becoming more time-consuming and complex in ambulance services, and there are moves to improve the articulation and recognition of ambulance volunteer training through nationally accredited courses (Dodd 2002; Fahey et al. 2003; Stone 2001). The increases in volunteer training demands has led to the popular perception in ambulance services that training is a disincentive to volunteer recruitment and retention (Aitken 1999; Fahey, and Walker 2002; Fahey et al. 2003: 15).

However, the SUBC survey results challenged this perception as it was found that volunteers attach a high level of importance to training; on a five point likert scale 80% rated training as very important (Fahey, and Walker 2002: 38). About half of the ambulance volunteer respondents also indicated that they wanted more formal training, more equipment practice, more skills checking and skills maintenance training, and more case debriefing (Fahey, and Walker 2002: 42). The other half of respondents indicated that they would like the ‘same amount’ of the above training events. The results showed that training quality was a greater problem within ambulance services than the perceived problem of excessive training as a majority of training involved volunteers training each other at a local team level, either weekly or fortnightly (Fahey, and Walker 2002: 41). Poor training implementation was also a problem for some volunteers, for example 34% of volunteers indicated that induction training for new recruits was ‘sometimes’ offered within four months of joining.

In the context of increasing pressures for accountability and professionalisation the training ‘troubles’ of ambulance volunteers are highly relevant to the volunteer/ambulance interface. For volunteers the trouble is gaining expertise, and for managers the trouble is in managing risk and ensuring a quality service.

Overall, there is some evidence of troubles at the interface between volunteers and ambulance services: troubles both for managers and volunteers. The spotlight on volunteer troubles in the early half of the first decade of the 21<sup>st</sup> Century, along with the difficulties in maintaining volunteer numbers have seen services begin to

improve resources, to review policies, and to generally focus more attention on volunteers. This has been occurring over the life of this study and the changing environment and renegotiation over resources form part of the context of this study. Conflicts over interests, which are played out in identity work are likely to be evident in the empirical data collected for this study, and it will be this and the process of negotiating interests that will be of interest to this study.

## **Conclusion**

As negotiations at the interface between services and volunteers ‘heat up’ within a broad environment of increasing professionalism and managerialism, the question of volunteer agency, the collective ability of ambulance volunteers to influence their interest and influence outcomes, is of prime importance in the negotiation process. How volunteers are able to influence issues of inequity and under-management, and how greatly they influence the change process will be a key finding.

The case study has been presented here in a series of narrowing steps, beginning with the background of rural health care, then the ambulance services that make up the case study. Finally, the foreground issues of ‘volunteer troubles’ from the perspective of both volunteers and managers were outlined. Pertinent contextual issues for this study are:

- the rurality of the volunteer service and the questions of equity that this raised;
- the increasing professionalisation of the ambulance workforce and the potential tensions this creates between paid and volunteer staff;
- the shifts in ambulance service structures towards more centralisation and government control; and
- the evidence of ‘volunteer troubles’ at the interface between volunteers and ambulance services that threaten the sustainability of services, but the lack of research and theoretical frameworks for addressing these issues.



This case study provides an intense example of a volunteer workforce under pressure from the trends of neo-liberal policies, managerialism and professionalism. These factors provide important contextual information for this study of volunteer agency at the interface with ambulance services. The analysis of empirical data containing the identity work involved in negotiations at the volunteer/ambulance service interface incorporates the real life context of the case study as set out here. The following chapter details how this empirical work was approached.

## Chapter Four: Research Strategy and Methods

*Social theory has to be useful and usable: it is not an end in itself. The vexatious fact of society has to be tackled **in** theory and **for** practice.* (Archer 1995: 135)

This study is an exploration of volunteer agency within identity work in a formal ambulance service setting and sits within a critical research paradigm. Following Bhaskar and Archer (1995; 2000; 1975) a critical realist ontology framed the study which allowed theorising from the empirical data. The research used a single case study design. Fairclough's (1992; 2003) version of Critical Discourse Analysis (CDA) provided a strategy for the analysis and integration of the findings that were found to fit well with a critical realist framework. Archer defends the opening quote above by claiming that without theory research descends into instrumentalism, but equally that a purely theoretical approach lacks usefulness (1995: 135). By underpinning this study with critical realist ontology, both of these difficulties are avoided.

This chapter outlines firstly the research questions developed from the issues identified in the literature review and case background, then the methodological underpinnings of the study, and finally the research processes chosen to address the research questions. The rationale for the research approach and methods are described, and clear information is provided about the research process. Ethical and quality issues for the study are discussed as they arise.

### Research questions

The research aim *to explore volunteer agency through identity work in health services to inform a theory of volunteering* has begun to be addressed through an analysis of how governance and common understandings influence volunteer identity work. The review of volunteer and ambulance literature highlighted that the cultural and structural conditions of relevance to this study include those I have named volunteer 'troubles' and 'expectations'. Troubles are problems for either volunteers or for those services employing volunteers and expectations are the anticipated benefits of volunteers based on neo-liberal and communitarian ideas of citizens. The recent policy context of neo-liberal policies over several

decades has also created a context of growing managerialism in health services and reduced rural health services. Key expectations of volunteer agency delivering social and moral benefits were found in the literature, but lack of substantive evidence highlighted the need to challenge such assumptions. Because of the nature and power of broad social discourses it is expected that some or all elements of these cultural and structural contexts will interplay with volunteer agency at the ambulance service interface.

To re-iterate, the conceptual framework provided the basis for the questions guiding this research:

- What are the key collective identities that apply to Australian and New Zealand ambulance volunteers and what are their key features?
- What evidence of volunteer agency emerges from volunteer identity work within Australian and New Zealand ambulance services?
- How does the cultural and structural context affect volunteer agency in rural Australia and New Zealand?
- How does volunteer identity work within Australian and New Zealand ambulance services inform a critical theory of volunteering?

The research design is based on a case study of texts that contain ambulance volunteer identity work in order to capture the important elements of cultural and structural context identified in the previous sections. Underpinning the research design is a critical realist ontology that allows the cultural and structural contexts of the study to be taken into account.

### ***A Critical Realist ontology***

The advantages of the critical realist approach adopted by this study are largely due to the 'uncovering' nature of the critical perspective and the attempts to look beyond the obvious. Critical researchers generally feel an interpretive approach has too passive an acceptance of individual values and is therefore too "subjective and relativist" (Callinicos 2006; see also Morrow, and Brown 1994; Neuman

1991: 56). Archer more specifically stresses that such a privileging of the individual view is a form of upward conflation that ignores the effects of society (Archer 1995: 6-11). For this study of identity work, an interpretive approach would have re-asserted a focus on individualism so prevalent in volunteering literature. A post-modern approach on the other hand would have limited my ability to analyse the influences of the values and meanings of individual volunteers at the ambulance service interface thereby limiting the account of individual agency (Ackroyd, and Fleetwood 2000: 12-13). Positivists on the other hand by attempting to identify fixed laws that dominate the social world, fail to account for the interactions of the broader context (Ackroyd, and Fleetwood 2000: 12). Archer calls this a downwards conflation resulting in explanations that have 'too much of society' (Archer 2000: 284).

The first benefit of the critical realist approach used in this study (as discussed in Chapter One) is that it privileges neither structure nor agency and instead studies the interplay between the two. Social practices depend on human agency, highlighting the importance of studying subjective beliefs and opinions, but social structures have a material dimension and so cannot be studied purely as an idea (Bhaskar 1975). Because of this critical realist understanding of 'what is', research such as this cannot therefore take individuals accounts as final and definite, but must instead evaluate them within their socio-cultural and real context. This requires an approach that can assess the interplay between structure and agency within a social, cultural, and historical context. Critical realism, CDA analysis strategies, and the case study method provide such an approach (Morrow, and Brown 1994: 250-266).

Application of a critical realist approach to this study was not an arbitrary or early decision. I began with a Foucauldian critical perspective, as Foucault's insights about power and knowledge provided powerful tools for the analysis of volunteer identity (Foucault 1972, 1981, 1991a). However, quite quickly the acknowledged inadequacies of Foucault's approach, such as relativism and an ignoring of agency (Hall 2001a: 78-79; Katz 2001; Wetherall 2001: 393), became apparent and I followed an emerging trend to combine Foucauldian insights with other theories (See for example Marsden 2005; O'Regan 2005). More particularly, others have

combined aspects of Foucault's work and critical realism (Fairclough 1992; Marsden 2005) in order to capture the benefits of Foucault's knowledge/power insights while circumventing gaps in his theorising and avoiding a relativist result.

The second major benefit of using a critical realist approach is that it enables connections between empirical data and explanatory theory. As this study aimed to inform a theory of volunteering, an approach such as critical realism was needed to promote the development of explanatory models (Marsden 2005: 134; Morrow, and Brown 1994). Both Marsden (2005) and Callinicos (2006) explain how this is done clearly, and I will make reference to their analysis of the explanatory benefits of critical realism as proposed by Archer (1995; 2000) and Bhaskar (1995; 2000; 1975).

In Chapter One the conceptual framework established that volunteer identity is part of a world that is both socially constructed and real. It is critical realism's 'acceptance of the possible existence of real, yet non-empirical entities' (Marsden 2005: 133) that sets it apart from other approaches and allows the development of explanatory theories.

The real world within a critical realist perspective has three distinct levels: the 'real', the 'actual', and the 'empirical' (Marsden 2005: 134). The real includes common-sense entities such as individuals who volunteer, unobservable entities such as gravity, and stratified social structures<sup>18</sup> such as ambulance services and class (Archer 2000; Bhaskar 1975; Callinicos 2006; Marsden 2005). The real are connected structures that have causal powers, which are 'intrinsic to [their] internal structures and mechanisms' (Marsden 2005: 134). This means that social structures are real entities because they have 'their own powers, tendencies and potentials... [and] because these relations which constitute structures pre-date occupants of positions within them, thus constraining or enabling agency' (Archer

<sup>18</sup> Social structures emerge from social relations and are a form of social organisation Willmott, R. 2000. "Structure, Culture and Agency: rejecting the current orthodoxy of organisation theory." In *Realist Perspectives on Management and Organisations*, edited by S. Ackroyd and S. Fleetwood, pp. 205-19. London: Routledge.

1995: 106). The causative powers of the 'real' are referred to as 'generative mechanisms' (Callinicos 2006: 161). So both ambulance volunteers and ambulance services need to be understood as 'real', with generative powers, but it is the interplay between them and the other unobservable real structures that are of interest to this study.

The 'actual' are the events and phenomena generated by interactions between the 'real'. In this study, it is the 'actual' identity work at the interface between volunteers and ambulance services that is of interest. Because events result from interactions, it is unlikely that a single cause would be found for any event or phenomena (Callinicos 2006: 168). So for example, as an apple falls from a tree (an event) the 'real' underlying generative mechanism is linked to the interplay between seasons, gravity and weather. 'The actual world is then the outcome of a particular set of interactions between generative mechanisms' (Callinicos 2006: 168). So the volunteer identity work events are expected to have multiple interlinked causes, and it is unlikely that this study will uncover them all. The complexity and interplay of generative mechanisms means that studies such as this develop understanding of volunteers through an ongoing reflexive body of work. Therefore uncovering one mechanism will often lead to discovering others. The entry point to these two layers of reality is the 'empirical'.

In the context of this study, the 'empirical' are subjective experiences and observations of events and phenomena, and as such, 'the empirical is tenuous, subject to reinterpretation and expands with our knowledge' (Marsden 2005: 134). In this study observed volunteer identity work is the empirical layer of the real world under study. While the empirical is a contextualised interpretation of the real world, the real world still exists outside of these socially constructed understandings and generative patterns at this level are looked for. Following critical realist approaches therefore this thesis on the ambulance-volunteer interface involves retroduction 'from manifest phenomena to generative structures' (Marsden 2005: 135) to allow theorising about volunteering. That is, theorising from identity work to the underlying mechanisms that power the volunteer/ambulance interface (see Figure 1).

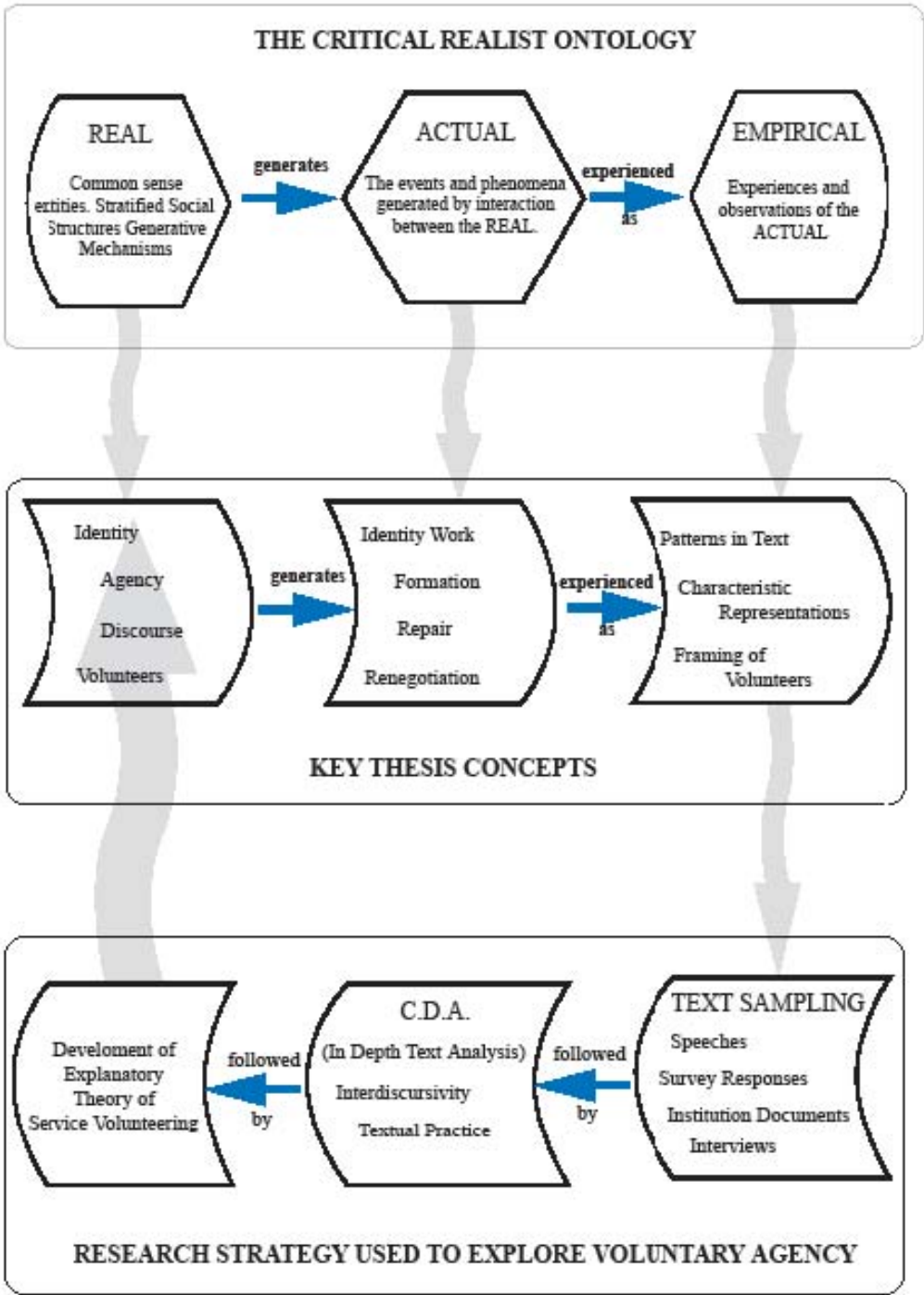


Figure 1 : Linkages between the CRITICAL REALIST ‘World View’, Key Concepts and the Research Strategy.

But the ontology of critical realism does not offer a research method and does not support any particular style of analysis (Marsden 2005: 136-137). The conceptual framework highlighted the importance of discourse in identity work and therefore Fairclough's CDA (1992; 2003; Fairclough, and Wodak 1997) method of research was used to conduct this study. Figure 1 graphically represents the links between the critical realist 'world view', the study's conceptual framework and the research strategy used to answer the research questions.

Through the CDA method the detailed analysis of texts ('the empirical') showed the form of volunteer identity work (the actual) which was used to uncover the broader social structuring of language about volunteers and also the social practices and structures of power within ambulance services (the real). Through discourse it was possible to examine volunteer agency within identity work to uncover the causal powers of volunteer agents and other causal mechanisms at the interface between volunteers and ambulance services.

### The position of the researcher

In adopting a critical realist perspective it is important to reflect on how this positioned me as the researcher (Creswell 2003: 184). In particular, I needed to acknowledge several points about the approach:

1. I am *theorising* from the empirical evidence that I encounter by applying *a priori* concepts. The study is therefore generalisable to theoretical propositions and not to volunteer populations (Marsden 2005: 136; Yin 1994: 10).
2. Social theory and social reality are interdependent and my social analysis may have practical consequences in society, requiring that I act ethically (Bhaskar 1989; Creswell 2003)
3. It is difficult to gain knowledge of structures because they can only be identified through examination of events, which means that my analysis is necessarily fallible. My analysis is the result of my observations of reality (Ackroyd, and Fleetwood 2000: 15; Morrow, and Brown 1994; Porter 2000: 144).



4. The usefulness of the studies ontological basis will be judged on how well it helps to understand the volunteer/service interface. The explanatory theory emerging from this thesis should lead to further reflexion and theorising of the volunteer/service interface as understanding is deepened (Ackroyd, and Fleetwood 2000: 15).

This critical realist approach can therefore be accused of a certain amount of determinism where reality, identity, power and discourse provided *a priori* categories for the study (Benwell, and Stokoe 2006: 45). This meant it was important for me as the researcher to acknowledge my own interests and potential biases in the study. As I entered this study through previous involvement with ambulance volunteers under the name of Fahey (Fahey, and Walker 2001b, 2002), where the research uncovered high levels of dissatisfaction amongst volunteers, I needed to be aware of a certain desire to emancipate volunteers. I was helped in my quest for a researcher's balanced judgement by my theoretical framework which acknowledges that power is everywhere and avoids a reliance on hegemony as an explanatory mechanism.

Determinism is partly justified in this study by the inherent difficulties in studying matters of power and reality. Morriss (1987: 145-151) makes the point that researchers must not expect to observe power, nor to "prove power claims" (Morriss 1987: 124) but only to find indirect evidence of power and to then attribute this evidence to counterfactual statements. This fits well with the realists' understanding that theory and practice are necessary for social analysis. In other words, the researcher must use logic to explain what *might* have happened and therefore needs to rely on theories to validate findings. Therefore theory is an essential prerequisite for studies such as this, where power and reality is a central concern.

However, determinism was diluted in this study by acknowledging the context specific nature of the analysis, the agency of ambulance volunteers and the difficulty of providing all the answers in my explanatory model. While the study avoids a focus on dominance this is not to ignore the premise of the study that 'volunteer troubles' and 'volunteer expectations' require exploration for their

underlying power basis and that the study aims to assist volunteers that may suffer injustice by challenging taken-for granted assumptions.

## **Ethical Conduct**

As a researcher it is very important that my research adheres to ethical standards and that I remain reflexive about my ethical behaviour (Creswell 2003: 62-67; Neuman 1994: 443). I observed both legal and moral obligations to conduct an ethical research project. Legally, ethics approval was granted by the University of Tasmania's Southern Social Science Ethics Committee and I worked within the parameters established by the ethics approval and met my reporting obligations.

Morally, I was guided by key ethical concerns listed below. These are an adaptation of Neuman's (1994: 455) list of basic principles for ethical social research:

- Researchers responsible for ethical behaviour
- Voluntary participation – no coercion
- Informed consent (See Appendix A and B)
- Honour guarantees of anonymity, confidentiality, or privacy.
- Consider and avoid potential harm
- Make interpretation of results consistent with the data, do not suppress negative findings
- Be open about study design when publishing
- Anticipate repercussions of publication

While many of the items in the list are clear cut and were undertaken, such as ethics approval, and subsequent requirements of informed consent and voluntary participation, some moral obligations to act ethically can be less clear and require researcher decisions. I aimed firstly to avoid physical and psychological harm to the research subject, and with a relatively non-controversial topic such as volunteer agency this was not a problem. There is a need to avoid creating stress or economic harm to participants and I dealt with some such issues in this study.

Within an organisational context the potential exists to create stress or economic harm if information could harm someone's career or standing within an organisation. As already mentioned anonymity was guaranteed to participants either through non-collection of identifying information or through de-identifying the data at the point of collection. Equally, confidentiality was provided to ambulance services as far as was possible to prevent economic harm to the organisations and those who direct those services. This ethical approach created some limitations for the study, which will be discussed further, but was the decision I took when weighing the issue of harm.

### ***Data selection, collection and analysis***

This section details the research methods that made up the study, the approach to data selection and collection, and the methods used to analyse the data. As discussed in the previous chapter Australian and New Zealand ambulance services were taken as an 'intense' case study of the volunteer/ health service interface. I used four different sources of data to access volunteer identity work: speeches made by politicians; open-ended comments from surveys; publicly available organisational documents; and interviews. All of these forms of data are considered text in a CDA method where suitable data can even include all modern electronic forms of communication and formal practices based on dialogue (Fairclough 2003: 3).

The text sampling strategy was purposive and theoretical, meaning that I looked for samples that would potentially manifest the constructs of theoretical significance to the study, namely volunteer agency and control in identity work (Patton 2002: 238). The four data sources each had a different purpose, but each contributed to answering the research questions. This fits with this study design of an 'embedded, single case design' (Yin 1994: 41-44) where subunits of the case are analysed for additional insights, in this case the seven ambulance services and the four data sources make up sub-units of the case. Four data sources also allowed me to triangulate the data and to gain data with both the breadth and depth to address a broader scope of issues (Yin 1994: 91-92). Triangulation strengthened the validity of the study because it allowed me to uncover areas of

consistency across the data sources, and when inconsistencies were encountered, they allowed me to re-assess and gain a deeper understanding of the data (Patton 2002: 247-248; Yin 1994: 92).

Each data source had a different rationale for selection and each contributed a different aspect to understanding identity work and volunteer agency, which followed the principles set out by Yin of having good conceptual grounds for multiple data sources (1994: 42). The data sources accessed volunteer identity work from different levels of public visibility and power influences. Ambulance volunteers, ambulance service managers, and policy makers were identified as the key groups likely to be involved in characterizing, representing and positioning ambulance volunteers. In addition survey comments, interviews, public documents and public speeches provided different stages in the development of discourse and texts where control can influence identity work and different levels of visibility.

These data sources are outlined in Table 4.

**Table 4: Sampling strategy for study of volunteer identity and agency**

<b>Data Source Number</b>	<b>Data Source</b>	<b>Identity work of</b>	<b>Variations in levels of control of identity work</b>
1	60 politician speeches	Three high level policy makers	A broad and public level of volunteer identity work in a national context.
2	702 open-ended survey comments	Australian and New Zealand volunteers	An individual and confidential level of volunteer identity in an issues context
3	4 organisational Annual Reports, 8 newsletters	Ambulance managers and volunteers	An organisational and public level of volunteer identity work
4	14 in-depth interviews	Executive managers, Middle level managers, and Volunteers as managers	An individual, in-depth and confidential level of volunteer identity work in a context of governance discussion

Each data source will be discussed further in subsequent relevant sections. Data from these sources were analysed with the assistance of the qualitative data analysis program N-Vivo (QSR International Pty Ltd 2002). Such programs assist in data management only, as they enable the storage, searching and coding of large amounts of qualitative data. The data analysis processes are discussed in depth later in this chapter. Each data selection and collection process will now be described in detail.

### Data Source 1: Politician's speeches

The first data sources were documents containing politicians' speeches. These were selected to access more powerful voices from Australian and New Zealand policy makers about volunteers, and do not focus directly on the ambulance sample. Three key politicians were chosen, Australia's Prime Minister John Howard, and Australia's Treasurer Peter Costello, and New Zealand's Prime Minister Helen Clark. All speeches are available on the politicians' web sites (see Appendix C). Those speeches that were delivered over the period from 2001 to 2005 were reviewed. All speeches that contained in the title the words volunteer, community, or a known philanthropic organisation's name, were considered. Several speeches mentioned 'business community' and these speeches were not counted as they did not address either volunteers or community participation. In total sixty speeches were found, of these fifty-three were Prime Minister John Howard's, five were Treasurer Peter Costello's and only two were from New Zealand's Prime Minister Helen Clark. The high number of speeches for John Howard was partly linked to a high number of 'community morning tea' speeches, and the low number from New Zealand's Prime Minister reflected that 'community' was not a key frame of reference for this government, which has moved away from the previous conservative governments neo-liberal agenda. The sixty speeches were reviewed for content that directly related to volunteer governance and or identity and six were found and selected for more in-depth analysis as volunteers were a key theme of the speech (see Appendix C).

The political speeches data was used firstly to look for characterisations, representations and positioning of volunteers at the highest political level. The texts were studied for insight into the policy level identity work on volunteers. The ‘Moral Volunteer’ was the most important identity used in the public arena by policy makers and findings of the representation and framing of volunteer identity occurs in Chapters Five and Six.

## Data Source 2: Survey open-ended comments

The second source of data for the study were the 702 open-ended questionnaire responses provided by volunteers as part of the *Stand Up and Be Counted* project survey in 2002<sup>19</sup> (Fahey, and Walker 2002). The comments were responses to one open-ended question in the survey asking ‘Do you have any other comments?’. This anonymous data provided access to a relatively unconstrained volunteer voice which had been collected to allow Australian and New Zealand ambulance volunteers to voice issues of importance to them, and no identifying information of the respondents were ever collected by the researchers. The study had ethics approval from the University of Tasmania. Respondents are identified in the thesis only by their allocated number, which appears in brackets next to the identification of quote authors as *Anonymous volunteer (e.g. 500)*<sup>20</sup>.

This is the only such data collection on Australian and New Zealand ambulance volunteers available, and as part of the original research team, I became aware of

<sup>19</sup> Nearly 2,500 surveys were disseminated through the ambulance services, and with a response rate of 38% (1014) the surveys could not claim to be representative. The initial descriptive research model using a random sample survey to gather information on the current situation for VAO and what is important to them. The project steps included formation of an Advisory Committee, literature review and survey tool development, survey dissemination, and data entry and analysis. The *More Than a Band-Aid Project* was considered a pilot for the *SUBC project* and the literature reviewed was updated, but not repeated. The survey was adjusted according to the new requirements from additional services and lessons learned from the pilot.

<sup>20</sup> Survey comments were numbered from 1 to 702

the value of the volunteers' unconstrained voice within the data after realising that volunteers were more constrained in voicing concerns in conversations within the ambulance context. The initial survey comment analysis was undertaken at a fairly basic thematic level, and in many ways did not do justice to the extent of the volunteers' comments. One of the surprising elements in the survey returns, was the volume of written responses to the open-ended question, some individuals wrote several attached pages and many filled the blank back page of the survey. This suggested a group who had something to say and comments such as "thank you for taking the time and effort to ask" (Fahey, and Walker 2002: 38-39), reinforced this point.

The re-analysis of qualitative data, such as in this study, is not as common as the re-analysis of quantitative data, however as the costs of research escalate, and many groups become over researched, there is a movement towards increasing the practice. There are several good arguments for the re-use of data, but also several methodological and ethical issues that need to be addressed (Heaton 1998: EJ). On the plus side, there are the cost-benefits, and the decreased burden on respondent groups for data collection, as well as the real opportunity to generate new knowledge and undertake a more in-depth study of existing data. All of these benefits apply to this study. Heaton (1998: EJ) suggests several methodological issues related to researcher/respondent relationships may occur if the re-analysis is undertaken by those other than those on the original research team. However, this point of concern is not relevant to this study as the type of data used was collected by survey, and therefore issues of researcher/respondent relationships are not relevant.

One issue that is relevant however, is the question of "where primary analysis stops and secondary analysis starts" (Heaton 1998: EJ). In many ways this thesis is an extension of my previous research work with volunteer ambulance officers, primarily because I have brought my contextual insights and unanswered questions about volunteers into this new study. However, by moving from the atheoretical mixed-method approach used in the first study to a critical realist approach in this study, and by using additional data sources, I believe there is a

clear division between the previous work (Fahey, and Walker 2002) and this study.

Re-analysis of the data also raises the important ethical issue of not breaking the contract between researcher and subject and this involves a professional judgement (Heaton 1998). The opportunity to re-analyse the qualitative aspects of the survey data was an opportunity to ‘hear’ volunteers’ complaints and issues in text that had not been filtered and was anonymous. Ultimately I judged the reanalysis of the data to be ethical because this re-use of the data fitted well with the original stated aims for the data collection<sup>21</sup>.

Analysis of the transcribed survey comments involved reading the comments stored on electronic files. I looked thematically for volunteer identities, and for how they were used in the texts. While overall the study found four key identities in use in Australian and New Zealand ambulance organisations, only two key identities appeared to be in use in the volunteers’ survey comments, the Moral Volunteer and the Professional Volunteer identity. Key samples of relevant identity comments were then selected for further in-depth text analysis to study identity work. These analyses are discussed in detail in the following section and Chapter Five outlines the key results achieved from the survey comments.

### Data Source 3: Organisational documents

The third data source was public organisational annual reports (four), and volunteer association newsletters (eight). Formal and public documents were chosen because they provided access to the representation of volunteers within

<sup>21</sup> The aims of the original study were: to gain a clearer understanding of the factors that affect volunteer recruitment and retention; to assist ambulance services to devise strategies to recruit, retain, train and support volunteers in Australia and New Zealand; to raise the profile of ambulance volunteers, to disseminate the findings of this project widely, and to influence future government policy relevant to emergency services provision utilising volunteers.



context. Because documents are convenient, and provide broad coverage in terms of time and events, and also reflect organisational power they should form part of most case study data collections (Yin 1994: 82). The annual reports are a formal and public representation of volunteers' place within the organisations, and allowed insight into how they were publicly represented. A key difference between this data genre and the interviews and survey comments was that volunteers were not the focus of the reports and were merely there in context. Four organisations were chosen on the basis of the importance of ambulance volunteers to their services and to provide a diversity of organisations, so that two were government services and two were non-government services. The reports were selected on the basis of using the most recent annual reports at the time of analysis, with a consistent time frame for all four organisations. The time period was the financial year of 2004/2005, for those services using a calendar year, 2004 was selected.

Organisational newsletters provided a less formal, but still public representation of volunteers in context. The newsletters from one volunteer association published over the two year period, 2002-2004, were studied to look at volunteer representations from a volunteer voice. This resulted in eight newsletters being reviewed for themes followed by further text selection. These newsletters were not from the organisations that had annual reports reviewed.

Analysing volunteer representations provided an important insight into identity work and underlying real structures. A key question that this data answered about the ambulance- volunteer interface was 'whose reality was made visible?'; the volunteers? the managers?, or the communities? In other words, who controls the organisational representation of volunteers? The ways that categorization and representation can control identity formation and influence identity work were discussed in Chapter One. Framing is a further method of control and in this study refers to how a piece of text was incorporated into broader reports/article and the choices that were made by the authors to contextualize the text on volunteers. The ambulance annual reports were therefore studied to understand the framing of volunteer public representations, the factors that are illuminated or hidden, and the material consequences of control over visibility.

Visibility is part of the space that allows volunteers to exist and be transformed in relation to economic, social and institutional processes (Foucault 1972: 45).

Therefore I analysed where volunteers were visible within the reports and how and where volunteers were publicly represented. I used this information to theorise about what the reports illuminated and what they hid, and the material consequences for volunteers of lack of control over discursive practices.

#### **Data Source 4: In-depth interviews**

The in-depth interviews for this study were undertaken during 2004 with 14 ambulance personnel from one ambulance organisation (identifying information confidential). Ambulance personnel interviewed included four members of the executive management, six members of middle-level management, and four volunteers who also participated at management levels. Participants were selected on the basis of their involvement in volunteer management and all those selected operated at some level of management to ensure that those interviewed were engaged in volunteer management discourses. Direct engagement with volunteer management discourses was the key requirement for participants because this study was not looking for personal perspectives or a representative sample of volunteers. Instead, the data of interest were the identity work between the managed and the managing.

Because discourses are taken to be drawn from a 'store' of available discourses, most interviewees should provide access to the shared knowledge available within the community of interest (Mercer 2000: 106-107). Interviewing allowed me to access the identity discourses that participant's used to think about, support, or resist changes to volunteer identity work, in context as a social process and in a local situation.

Focusing on qualitative data in its natural setting provided context and groundedness for the data collection, and allowed me to focus the data collection onto matters of identity work during change processes (Creswell 2003: 186; Miles, and Huberman 1994: 10; Yin 1994: 84-85). Even though 'people are not equally articulate' and the 'researcher's presence may bias responses' (Creswell 2003: 186) the interview data was an essential source of identity work evidence.

The particular characteristics of the interviewees, such as age and sex are not relevant to the study, and for this reason and for the purpose of maintaining confidentiality, demographic characteristics are not reported here. The only point of relevance was the length of time the participants had been with the ambulance organisation. Of the fourteen interviewees, all had been with the organisation for between five and twenty years, except for three participants who had only been with the ambulance service for between six months and two years. This newer group, brought new managerial and volunteer management discourses into the organisation and these created tensions between new and old ways of talking and thinking about volunteer management, which was important to the study findings.

The organisation chosen was undergoing organisational change processes that affected the volunteer program, thereby providing me with access to a situation in transition, and providing a window into taken for granted knowledge (Foucault 1972: 55-58; 1991c). Changes spotlight the tensions and changing boundaries around discourse, and therefore provide useful research opportunities. Therefore I was interested in studying a situation where volunteer management was being thrown into a state of transition, where the tensions and various discourse used to justify power were brought out into the open. As the changes within the volunteer/service context are of central concern to this thesis a situation that exhibited clear evidence of change was an important contextual requirement for the selection of interview data.

My access was supported by senior managers who were interested in research around the change process. Participants were asked by phone if they would like to participate and if so a mutual time was agreed upon. Administrative staff from the ambulance organisation assisted by contacting potential participants, and the organisation was provided with a report on observed changes in the volunteer program as a result of the data collection. This mutual benefit approach acknowledges the need for research to be reciprocal and not to 'use up' contacts and people (Creswell 2003: 65).

No one declined to be interviewed. All interviewees were provided with an information sheet and consent form prior to the interview. The information sheet

detailed the purpose of the research, what would be required of participants, the voluntary nature of the interviews, a guarantee of anonymity and confidentiality, contact details of the researcher and of the ethics committee for queries and potential complaints.

Two key ethical issues for this aspect of the research were to ensure participation in the research was voluntary and to ensure confidentiality. An emphasis on voluntary participation was important because when working with an organisation to select key participants; participants can feel obliged to participate. This study therefore provided several non threatening opportunities for withdrawal. Firstly, participants were assured that participation was voluntary both in the information and consent sheets. Participants were asked verbally before each interview if they wished to participate and were assured that they were free to withdraw from the research at any time without prejudice. Participants were further offered the opportunity to withdraw their data at the stage of verifying the transcripts. Despite these opportunities, and perhaps because of the emphasis on confidentiality, no participants chose to withdraw.

Confidentiality was provided by assigning a pseudonym to participants, and not reporting demographic information. Any information that could only be known by particular participants was disguised, potentially identifying speech idiosyncrasies were not reported, and some details were changed to perturb the data enough to hide identities (Creswell 2003: 66). The normal processes for data protection were undertaken with data kept in a locked cabinet at the University of Tasmania for a guaranteed five years. Electronic copies of transcripts were sent directly to participants via personal email addresses.

Interviews lasted between forty-five and ninety minutes and were undertaken during work hours for paid staff, to minimise disturbance to participants' private lives and to facilitate participation. The interviews were conducted in a place that was most convenient to the participants, and therefore three interviews were by phone. All interviews were tape recorded, with the consent of the interviewees, and later transcribed verbatim. Minimal notes were taken during interview to allow full concentration on the interviewees and the process of interview, but after

each interview I completed a field note sheet that detailed the date, location, participant's pseudonym, and key themes that had emerged from the interview. This note taking provided a back up source for the data collection and also helped me to maintain a reflexive process.

Once the taped interviews were transcribed verbatim, participants were sent an electronic copy of the transcripts and were asked to verify the data, and were provided with the opportunity to clarify or delete information. Except for one individual, all participants made either none or only minor corrections. One individual initially wished to delete large chunks of valuable text that had been critical of management processes, however after discussion about how the data would be used, this participant was comfortable with more minor editing changes.

An interview guide provided a structure for the interviews which ensured that a similar line of enquiry was followed with all participants around the topic of change and volunteer management, but also that I had the scope to follow-up particular sub-topics with some participants (Yin 1994: 85).

My five open-ended questions in the interview guide were:

- 1        What changes are happening in your organisation in relation to the volunteer program? (This can be changes that have already happened, that are in process or are planned)
- 2        Why you think these changes have occurred?
- 3        How do you think these changes to the volunteer program affect you now and in the future?
- 4        What has the change process been like?
- 5        What do you see for the future of volunteering in this organisation?

In total the interviews yielded over 81,000 words of transcript, which required further text selection before comprehensive text analysis. This third stage of data selection was undertaken after a strong familiarity with the data was achieved through re-reading and thematic identity analysis. Text pieces were then further

selected on the basis that they contained one succinct or several examples of themes relevant to the major identity themes, or because they demonstrated important identity work. Some individuals are quoted more than others either because their work role meant that they could discuss matters that were more relevant to the thesis topic, or because they were more coherent in their speech. No 'unusual' text pieces were selected and used for discussion, unless their deviance from the normal discourse is highlighted in reporting. This was an important part of remaining reflexive to avoid selecting text pieces that 'fit' an argument, rather than pieces that are true to the data (Creswell 2003: 190-196). Further information about analysis will be provided under the text analysis section.

## ***Data analysis***

After collecting data a further selection of texts was required to allow in-depth text analysis using CDA (Fairclough 1992: 230). Textual analysis then followed Fairclough's suggestions (1992: 231) in first examining the identity themes and broader orders of discourse that the texts drew on, followed by an analysis of features of the texts such as grammar, wording and themes. The final step in the analysis was to consider how the text analysis uncovered and related to the real world and broader socio-political contexts. In effect these steps were not completely linear, but instead followed an iterative process linking a close analysis of selected text, with broader patterns indicating actual and real structures.

Fairclough's (1992: 231-237) outline of CDA methods has sixteen different potential methods for analysis of text and discursive practices. However, I followed Fairclough's (1992) synthesis approach to CDA by selecting from a 'tool box' of options for textual analysis. The use of a selection is necessary, as analysing all of the aspects of text proposed by Fairclough (1992) would limit the researcher to analysing a very small selection of text, without extra gains in understanding. After initially trialling all sixteen of Fairclough's suggested analysis methods in my early data analysis I found four key tools of greatest relevance to these data. The most relevant aspects of text to analyse were transitivity, modality, word meaning, and interdiscursivity. All of these terms will

be explained in detail later. These particular concepts were the most relevant for this data set because they highlight elements of agency and identity and because the particular genres of textual data for this study made certain aspects of textual analysis less relevant, such as elements of politeness for example.

Data analysis was supported through the use of the N-Vivo (QSR International Pty Ltd 2002) computer analysis package and involved looking for broad identity themes and features. Initial analysis delineated four key volunteer identities within ambulance organisation discourses: the Moral Volunteer, the Professional Volunteer, the Staff Volunteers, and the Self-interested Volunteer. This process was followed by further text selection to allow in-depth text analysis (Fairclough 1992: 230). Text pieces were selected for in-depth analysis if they clearly demonstrated the key identity features or their use in power dynamics. The four identities and their key features are described and discussed in Chapter Five.

During the next stage of data analysis the identity work of the four identities was explored. Chapters Five and Six present this work on the operationalisation of volunteer identities and volunteer representation in ambulance organisations. The textual analysis process is explained in some depth in this section, as many explanatory elements were removed from the main body of writing to assist in the 'readability' of the thesis. The following technical details will help the reader to understand the rigorous analysis that was applied to the text in the findings chapters.

The analysis of identity work was then placed in a context of the social practices of power issues and resources to understand the 'real' social structures and other generative mechanisms underlying the identity work. An explanatory theory was then developed to explain the way in which volunteer agency and identity work interplayed with ambulance services and broader social conditions. This explanatory theory is presented in Chapter Seven. The following section outlines the contribution of each discursive and textual analysis techniques to the study findings.

## **Interdiscursivity**

An important focus of analysis for this study was which discourses are used, and how they are used in talk and text. This use of other discourses is called interdiscursivity in CDA and it shows the interplay between agency and structure. The different discourse types that are drawn upon in any text, can be a combination of genres and/or discourses and they can be explicitly agreed with or contradicted (Fairclough 1992: 232; 2003: 218). Examples of interdiscursivity in the texts linked the textual analysis with broader social practices because they are an act of choice by the author, but an act of choice constrained by the discourses that are socially available for volunteer identities (Fairclough 1992: 84).

Analysing interdiscursivity involved identifying the discourses drawn upon for identities, and the genres of the texts used (Fairclough 1992: 232). For example this study found that new management staff members brought new management discourses into the organisation. The interdiscursivity evident in their speech mixed management discourses and ambulance discourses in a way that was new to the organisation. The introduction of new discourses provided evidence of changes within social relations, as individuals or groups drew on new discourses or genres to perform new functions within ambulance identity work.

The genre is a 'conventionalised way of using language' (Mercer 2000: 111) that follows a set of rules and has a specific aim (Martin 1993 cited in Mercer 2000: 111). Genres influence texts because they structure the types of exchange and the speech functions within certain groups or situations and therefore I needed to interpret the data set according to the cultural context of the genre. This is partly because genres have different purposes, different rules, and also because each genre provided a different level of specificity for the study. In relation to specificity - the media texts provided broad discourses about volunteers, the organisational printed texts provided general organisational discourses about volunteers, and the interviews provided a less formal and edited access to discourses that were specifically about changes affecting volunteers within ambulance organisations.



The genre of data is also important in understanding what is important, relevant, interesting or prominent within a certain context (Mercer 2000: 111-112). So for example, interview formed one genre in this study. Interviews are structured so that one person gives information that is the result of questions asked by the interviewer. Interviews are mostly based on looking for personal opinions, but are relatively formal compared to social conversations. Therefore, it would be unreasonable in analysis to highlight the question/answer structure of the interview data and to imply some significant power relations between the participants in a way that may be relevant to participants in a social conversation. It would also be inappropriate to apply analysis concepts important in conversation analysis, such as politeness, to the interview data. Therefore, understanding the limits and context of each genre was an important part of the data analysis.

Finally, it is also necessary to ascertain where the text is in a genre chain to understand the level of influence that power plays in the final text (Fairclough 2003: 66). Text pieces that are early in a genre chain, such as the interviews in this study, will have less formalisation and power influences. The longer the genre chain, the more likely that it has been influenced by previous chains and previous authors. Therefore, the organisational documents in this study had more evidence of the chain of power in volunteer representation than the interview data, and the texts from the survey comments were very early in the genre chain allowing volunteers a freer voice.

## **Textual practice**

The more micro components of text that were relevant to the analysis of volunteer identity and agency were three forms of grammar:

- theme,
- transitivity and
- modality

- wording and
- word meanings.

And two components of vocabulary:

These components of text, the process of analysing them, and their relevance to the analysis will be explained briefly here.

**Theme** looks at the macrostructure of the text i.e. the gist, or the topic. Theme is generally signalled by titles, thematic words, thematic first sentences, knowledge about global events or actions (Fairclough 1992: 183). As already stated all of the data collected was reviewed for key identity themes, before a further selection of text was attempted, so that while specific quotes are used in this thesis, their analysis was also based on a broad reading of all the texts. Theme was therefore a very important early strategy within the data analysis.

**Transitivity** refers to the way that something exists when it is referred to by social actors, through types of processes and participants involved in them. The study of transitivity has its origins in critical sociolinguistics (Fairclough 1992: 178). Analysing transitivity requires looking to see who is allocated agency for actions, and how causality, and responsibility are allocated (Fairclough 1992: 235236). Representation was a key aspect of transitivity for this study where responsibility for events was allocated or information framed through foregrounding certain aspects and backgrounding others. Chapter Five and Six highlight how ambulance volunteer identity work allocates responsibility for local ambulance services. These elements of transitivity had significant impacts on the agency of volunteers to effect change within ambulance services.

Nominalization is another important aspect of transitivity. Nominalization allows the backgrounding of a process and it is not necessary to specify the actors in the process, 'so that who is doing what to whom is left implicit' (Fairclough 1992: 179). An example of nominalization is where the act of volunteering has become a thing, so that when one says 'volunteering is increasing', volunteering can be spoken of without needing to imply that actors are required to carry out the activity. This was an important speech mechanism in the data for avoiding or confusing the issue of agency.

**Modality** is the degree to which one commits to or against an utterance, that is the affinity with propositions<sup>22</sup> (Fairclough 1992:158), which provide insights into the relationship between authors and representations of reality (Fairclough 2003: 219). It is an aspect of identification because it shows what people will commit to as truth, or the groups to which one wants to show solidarity (Fairclough 2003: 17).

When the speaker makes it clear that is their own views being expressed this is called subjective modality, whereas if it is not clear ‘whose reality’ is represented this is called objective modality, which often indicates a position of power (Fairclough 1992 159). So for example, in the analysis of interviews with management the following excerpt demonstrates a position of weakness because the author so clearly identifies the comments as their own reality ‘*And I think there’s a misconception that volunteers are easier to manage, when they’re a lot harder, in my opinion,...*’ (New manager Danielle). The words *I think* and *in my opinion* demonstrate subjective modality and low affinity which suggests that this is not a strong discourse within the organisation, that the author does not feel they can speak on behalf of others with confidence, and that there is an attempt to avoid placing blame by making the text an opinion piece. The context of a text piece is always important as low affinity may express lack of power, or lack of conviction, or lack of knowledge (Fairclough 1992: 160) and clues to these subtleties were looked for in the broader text context.

Other linguistic strategies of relevance to analysing modality are voice and indirectness. Participants can use either passive or active voice in order to accept or avoid responsibility. Passive voice can be used to avoid responsibility or to

<sup>22</sup> Affinity to a truth or other social actors can be demonstrated by: modal auxiliary verbs such as: must, may, can, or should; tense for example: is, has; modal adverbs such as: probably, possibly, obviously; modal adjectives such as: likely, probably; and hedges – sort of, a bit, or something, speaking hesitantly.

avoid placing blame, and active voice to accept responsibility or credit for something

The benefits of using indirectness in speech include defensiveness and rapport (Lackoff 1975 cited in Tannen 2001: 155). Defensiveness is when the speaker wants to be distant enough from the idea so that they can change or refute what they were saying in case of a negative response. The rapport benefit comes from reaching agreement through a consensus rather than a strong assertion. Here again context is important when analysing such aspects of modality. Defensiveness could also be demonstrated by the expressive caution given to delicate matters. Silverman (2001: 130) shows how delicate matters are dealt with by 'marking' them as delicate, and that delicate matters will be attended by hesitation and repair. One clear example of a delicate matter in this study was any talk about the legality of volunteers as staff members. So for example '*And I think that there's premature extremes, one is that ...are people getting to the point..., I really value our volunteers, but we're getting to the point where we're starting to get really confused about what is a volunteer..*' (New manager Danielle) this excerpt demonstrates hedging (hesitation and pauses demonstrated by ...), and repair (I really value our volunteers) which marked what followed as a difficult topic.

**Vocabulary:** There are many ways to analyse vocabulary, but for this study wording and word meaning proved the most relevant. Wording refers to the ways that meanings are signified through the selection of words. Different perspectives and frames of reference can be demonstrated through the wording of meaning, and alternative wordings can be an important focus for analysis because they may indicate struggles and new perspectives (Fairclough 1992: 77). So for example, when one management member discussed changes in volunteer representation activity and said '*and will become quite vocal and maybe even quite militant...*' (Traditional manager Bob) they suggested an aggressive representation by drawing on a warfare frame of reference. This example demonstrates how the wording selection creates meaning and how the reasons for such a selection reflect an important act in power relations.

However, it is important not to overstate the agency that individuals have to select wordings because they are always drawing only from a socially constrained selection. This is particularly so when applied to identities, as this study found evident in many tensions created by linking well established volunteer identities with new wordings.

The second important element of vocabulary for this study was 'word meaning'. In essence it is the reverse of wording because it focuses on the meaning of words (Fairclough 1992: 185-186). It is important to focus on 'key words' because they will be ones which have either general or local cultural significance, which have variable meanings, and which are a site of struggle. The word 'staff' was found to be one such word in this study, which was particularly significant because this was one of the key identities of volunteers. Word meanings can connect with wider struggles, such as the struggle to have volunteers incorporated under organisational policies and procedures by using the word staff. But also the use of one word can be polyvalent which means that word meaning can change rapidly, sometimes in the same sentence. If the meaning potential is 'ideologically and politically invested' (Fairclough 1992: 187) then the changing of word meaning can be used by the powerful to introduce new meanings or to claim new meaning territory. Analysis therefore focused on how the word meaning connects with broader struggles because particular uses of word meanings can be forms of power (Fairclough 1992: 77).

All of these elements of analysis are synthesised within the data. Occasionally, certain text pieces are closely discussed within the chapter text, and issues of importance to the analysis, such as modality, may be explained. Such examples follow the accepted style within the field of discourse analysis and add validity to the study as readers are able to see how text links closely to findings. However, too much emphasis on textual analysis interrupts the flow of the text, and so more frequently text examples are given and only discussed in relation to identity work or real generative mechanisms.

## Evaluation of the research approach

The theoretical framework used for this study solves several problems of other approaches. It does not conflate power with resources, processes or interests, and it does not force studies of society into narrow economic reductionist accounts. It leaves instead room for the effect of humanity, family and love in an account of power, and an intrapersonal agency. It acknowledges agency, culture and structure, and the role of truth and representation in power relations without excluding the role of class or resources. It allows acknowledgement of both a real world and a world that is made by discourse and thought.

This research approach therefore allowed me to critically investigate volunteer agency through identity work, and to avoid the social constructionist pitfall of idealism and relativism, which sees all the social world as socially constructed and with no basis for judging truth claims (Ainsworth, and Hardy 2004: 246; Archer 1995, 2000).

Fairclough's CDA provided a field method for selection and analysis of text which fitted well with a critical realist ontology, and which also helps to avoid some the lack of a method for field data in critical realism and governmentality (Dean 1999; Fairclough 1992: 56; Marsden 2005: 136).

The research approach also provides an ability to deal with inter-disciplinary approaches. This work is based in a rural health department, which has no set discipline or school of thought. My colleagues are informed by theories from sociology, English studies, nursing, medicine and education and mixed method inter-disciplinary studies are the norm. CDA is a form of interdisciplinary research which takes the perspective that particular concepts can be developed theoretically and methodologically through dialogue with different disciplines (Fairclough 2003 225).

However, *a priori* concepts applied to qualitative inquiry pose risks for the unwary researcher. Because the researcher applies a theoretical perspective to the data there is a greater risk of bias and prejudice (Patton 2002). I used several strategies to prevent a biased reading of the data. Firstly, I needed to ensure I



remained reflexive during the research process. A *reflexive* orientation meant that the theories and beliefs that framed the study were made clear and that results of the data analysis are not presented as a final 'truth', but as an interpretation based on the research processes and use of theories (Wetherall 2001: 396). While the study framework acknowledges a real world, my findings cannot be represented as fact because of the complexity and invisibility of the stratified world. However, the use of established research processes ensured that while the findings are not claimed as a final truth, they have the robustness provided by tested methods. Hence the findings can contribute 'to social life because of [the] particular expert procedures' (Wetherall 2001: 397) used in the research process, and because they contribute a fresh perspective to taken for granted knowledge.

The need to maintain organisational confidentiality came at the price of transparency of the research process. While research process transparency is affected, the data validity is not, as CDA taps into the local and social discourses within a field, and as ambulance services belong to a community of practice the findings are relevant across all services. The use of a typology allowed me to address some of the variation in ambulance services without naming any particular service. The study approach and limits to transparency arising from the ethical issue of ambulance confidentiality mean that where the study findings are generalised, this is based on the application of theory, not a claim to broad empirical data gathering.

While individual organisations were protected by confidentiality the ambulance services as a whole could not be protected, however the effects of criticism are diluted by being spread across ambulance services in general, and the issues dealt with by this thesis are common to all ambulance services (though obviously with different contextual elements). As this work aims to assist ambulance services to interface with volunteers in a more sustainable manner, the benefits of the study should outweigh any negative publicity.

And finally, this study was undertaken at one moment of time and therefore while the insights it provides will be valuable, the situation described will already have changed by the time this study is published.

## **Conclusion**

This chapter has described the critical realist ontology underpinning this study and the CDA methods to guide the collection and analysis of texts. It provides an account of the steps undertaken in the research process and supports the validity of the findings by establishing the rigour of the research undertaken.

The following chapters present the findings that emerged from this research approach and the theoretical insights this provided.

## Chapter Five: Four Ambulance Volunteer Identities

*‘A position, especially an occupational role, gives us resources, representation and repute: these are both the objective rewards of our incumbency and the external indicators of our social worth.’ (Archer 2000: 304)*

This chapter is the first of two findings chapters that present the results of the analysis of ambulance volunteer identity work. This chapter contains a description of the ambulance volunteer identities used in ambulance services, and an outline of their key features and the different volunteer or managerial interests they reflect. As Archer’s opening quote says, there are personal gains from occupational roles, but the focus here is on how those gains are dependent on the identity work attached to the role. It is not the role of ‘ambulance volunteer’ that brings gains but the characteristics that attach to ambulance volunteer identities. Therefore, the identity choices made in talk and text, reflect attempts to access or control the benefits of each role, which in turn reflect the prioritised interests of those using the identity. It is by uncovering firstly, the identities that are used to characterise ambulance volunteers, then how these identities position and represent volunteers, and finally who uses them, that this chapter contributes to understanding volunteer interests and agency at the interface with ambulance services.

The four identities described are: the Moral Volunteer identity; the Professional Volunteer identity; the Staff Volunteer identity; and the Self-interested Volunteer identity. Ambulance volunteers gain resources and repute in varying degrees from the different volunteer identities, but only the Moral and Professional Volunteer identities reflect the prosocial interests of ambulance volunteers. Societal changes are reflected in two newer volunteer ambulance officer identities, the Staff and Self-interested Volunteer, as volunteers and managers adjust to changing interest priorities. Through these findings I highlight how the choices taken in ambulance volunteer identity work reflects either the social or practical interests of ambulance volunteers and managers.

Ambulance identities however, are not only about individual choices, as both control and resistance are evident through the different positioning and representation used in identity work. This is not a simple matter of managers versus volunteers because neither group is homogenous; firstly, there are two broad groups of managers influencing volunteer identities, which I have called either traditional or new managers and both groups attempt to control or resist volunteer identity work. Secondly, volunteers are not a homogenous group, and their individual identity work depends on whether they have prioritized social or practical interests. By differentiating between groups and how they use the ambulance volunteer identities, this chapter lays the groundwork for understanding the gains and losses attached to each identity. This groundwork provides insight into the collective agency of volunteers at the interface with ambulance services, which will be the focus of the following chapter.

Of the four key ambulance volunteer identities the most dominant is the Moral Volunteer identity, which will be outlined first. The Professional Volunteer identity follows and then the more recent Staff Volunteer and finally the Self-interested Volunteer identity. For each identity I detail the key characteristics and describe who uses each identity and how this meets their interests.

## **The Moral Volunteer - altruistic and of the community**

The Moral Volunteer identity reflects the prosocial commitments of ambulance volunteers and their resultant status gains and resource losses. The Moral Volunteer identity is dominant within ambulance services, and is one of the most public faces of volunteering. The identity draws deeply on traditional discourses and imagery: of charity workers, of rural battlers, and of Australian mateship.

### **Key characteristics of the Moral Volunteer identity**

It is the Moral Volunteer identity to which many volunteers commit themselves in the process of becoming an ambulance volunteer and the key characteristics provide important information about the boundaries this creates. These are:

- volunteers as special people,

- volunteers helping rural communities, and
- volunteers working for rewards other than money.

The Moral Volunteer identity is a dominant identity in ambulance services, evidenced by its prevalence in talk and representations. As the definitional debate on volunteers shows, a Moral Volunteer identity contains many common-sense understandings of volunteers. A combination of some or all of the three elements of the Moral Volunteer identity was found in many discursive events within ambulance services reflecting the dominance of the identity. In ambulance services the Moral Volunteer identity was used by volunteers, management and communities in general.

### Special People

The social prevalence of the identity can be seen through the increasing linkages made between Moral Volunteers and an Australian identity by liberal politicians (Brett 2003). The Australian Prime Minister, John Howard, has particularly linked volunteers to a moral Australian identity in his promotion of citizen values (Brett 2003). The following excerpt taken from a speech he delivered at the Volunteer Awards Ceremony, Cronulla Sydney, 14<sup>th</sup> August 2001 (available URL: [www.pm.gov.au/news/speeches/2001/speech1172.htm](http://www.pm.gov.au/news/speeches/2001/speech1172.htm)) actually highlights key features of the dominant Moral Volunteer identity found in ambulance services:

*Prime Minister Howard:* It is a real pleasure for me to share the platform this afternoon with Bruce, particularly as we are having a little ceremony, an occasion, to honour and thank and acknowledge the people who really when the chips are down really hold our society and our community together. And that is the hundreds indeed tens indeed hundreds of thousands of Australia [*sic* ns] who for no reward other than the satisfaction of helping their fellow Australians, no reward other than the satisfaction of bringing a facility to a community, of getting a sporting activity going, they are prepared to give up their time to build a happier and more cohesive society.

Australia in many ways is the greatest volunteer society in the world. One of the reasons for it is that because in our early days we had long distances and small populations and no help from outside, we really had to club together and to make things work in local communities. And out of that necessity we have built a fantastic volunteer spirit and every level of Australian life that voluntarism, and every stage in our history has been an example of Australians to the rest of the world.

All the elements of the Moral Volunteer identity are present in the above excerpt: volunteers as special people, helping rural communities, and working for rewards other than money. The ‘specialness’ of volunteers is the basis of Prime Minister John Howard’s speech. Volunteers are acclaimed as ‘special’ people, people who are ‘caring’, ‘altruistic’, and doers who get things done in local communities. This honouring of volunteers is a key feature of the Moral Volunteer identity where the volunteer contribution is largely described using valiant and exaggerated terms such as extra-ordinary or wonderful. In the above excerpt the volunteers’ role in the local setting is even linked to the broader Australian society and the role of good citizens. Prime Minister Howard credits volunteers for holding our society together and lays claim to Australia being the ‘greatest volunteer society in the world’. While complimenting volunteers is part of the context of the speech setting, where the Prime Minister was attending a ceremony for the express purpose of thanking volunteers, the speech highlights how volunteers are positioned to be rewarded within a good citizen discourse. The Moral Volunteer identity uses positive stereotyping and gives volunteers respect and thanks for their unpaid work.

As later sections of this thesis will show, the benefits that flow to governments from reinforcing a Moral Volunteer identity are linked to the cost-savings that volunteers generate at the service level and the ability of such positive stereotyping to hide structural inequities that exist prior to, or result from new policies.

The Moral Volunteer is prevalent within ambulance services. The following excerpt is from an interview with a ‘new manager’ and reflects key elements of the Moral Volunteer identity:

*New Manager Danielle* -I mean I look at what they do and it’s just amazing stuff, and if that’s culture, then we want to keep that. And I think that’s the grass roots stuff: Volunteers come here because they want to actually save lives in the community and do something to help that community and I think we mustn’t ever lose that. So that’s the bit I think that’s great.

Here again volunteers are honoured as special people using exaggerated terms, acclaimed for helping the community. By claiming that ambulance volunteers do

‘amazing stuff’ Danielle is honouring ambulance volunteers as special: drawing on a positive stereotyping of the volunteer. Danielle links this ‘amazing’ ‘grassroots’ activity to helping the community, which is the second key characteristic of the Moral Volunteer identity.

## **Rural Community Helpers**

The community is foregrounded as the rationale for ambulance volunteer activity in the Moral Volunteer identity. When ambulance volunteers are characterised as ‘helping the community’ they are positioned both as being from the community and for the community. The following excerpt stresses the community as the motivation for volunteer work:

*Anonymous volunteer (104):* We must remember we join for the community, not for other reasons.

Helping the community as motivation is a normalised characteristic of the Moral Volunteer, which is suggested by this forceful text piece that speaks for the majority.<sup>23</sup> While historically charitable volunteers were represented as working to help ‘others’ or ‘the poor’, more recent representations link their work to ‘the community’ (Tennant 2001). The use of the word community implies communities of disadvantage, where marginalised or disadvantaged groups are categorised according to their common disadvantage (Darcy 1999: 16; Everingham 1995: 29). However, the word community also links into the romantic promotion of communities as ‘self-generating fountains of “good-will”’ (McDonald, and Marston 2002: 384).

As the helping nature of the volunteer is foregrounded in the Moral Volunteer identity the community disadvantage is backgrounded. The idea that some communities *need* volunteers to ‘save lives’ is not foregrounded and therefore

<sup>23</sup> By using the term ‘we’ the volunteer is speaking to all volunteers. This text piece is in the context of defending the moral imperative of the Moral Volunteer. ‘We must remember’ is used as a rebuke to those who by implication have forgotten that the community is the rationale for volunteer work. There is no hedging or apology in the comment and it is therefore likely to be a dominant discourse, something to be taken as fact.

does not overtly identify a disadvantaged community. The community is however identified by a common need and as a site for meeting needs. Prime Minister Howard's speech linked volunteers to a rural community need that was caused by isolation. The assumed disadvantage for communities serviced by rural ambulance is one of distance from acute care, with either a consequent absence of services or time-delayed services.

The Moral Volunteer identity has a strong urban/rural dualism and this draws on a long history of rural versus urban discourse. However, the disadvantaged rural community difference was not foregrounded in the Moral Volunteer identity. Instead rural is represented as an idyllic space where there is a large degree of homogeneity among communities, a coherent and caring place (Cloke, and Little 1997b: 275-279). Urban on the other hand is represented as large, uncaring and filled with such diversity that sense of community is localised or absent.

In this way the Moral Volunteer identity reflects the prosocial interests of those individuals who have prioritised connectedness in society by taking up this identity. It should not be ignored that the Moral Volunteer identity reflects the value system of the volunteers that prioritise a caring society. This 'helping the community' focus therefore represents the prosocial concerns of volunteers while it also normalises a rural disadvantage.

The rural/urban duality is evident in 'othering' urban populations and was frequently present within ambulance discourses. This excerpt from an interview with field management staff shows this 'othering':

*Manager Reg:* I guess the group that I look after are different from, say, a [outer urban area] group of volunteers, if I was to use [name] as an example, which is made up mainly of people mainly from the metro area which go out there and man the station, whereas in the [rural area] they're all hard working people, be it farmers or their own business etc. So they're very straight to the point, they're not into fluffy stuff, they're not into any crap, they just want to get to the point, and they don't waffle on, if you want to put it [like] that, if they've got something to say, they'll just say it and that's it. Initially I thought...I wasn't used to that initially, I didn't quite know how to take that, but I've realized that it's just them, they're just very straight to the point, down to earth people and they don't crap on about things.



While ambulance volunteers no longer work in city areas in Australia, city-based people do commute to outer urban areas to volunteer for ambulance. This creates a point of comparison and difference between the rural volunteer and the urban ('metro') volunteer, and leads to an 'othering' of urban volunteers. Identifying difference and those who are 'other' to ourselves is considered to play an important role in the constitution of self at both a psychological, cultural and social level (Hall 2001b: 328-332). Reg clearly describes how he found the rural volunteers different –they are represented as action people, straight to the point, and not interested in a lot of talk.

Therefore the 'othering' of urban ambulance staff assists rural volunteers in forming their own identity as active, caring and connected community members, which in turn forms part of a justification of why rural ambulance services are different to urban services. By representing the Moral Volunteer as an active community participant who works to make things happen and wants to help, the rural volunteer also gains increased status.

Positioning Moral Volunteers as active community participants draws on both the meanings of being a good citizen, but also draws on a rural/urban dualism where rural people get things done and drive an action agenda, unlike policy driven urban counterparts. The following interview excerpt foregrounds the agency and action of the Moral Volunteer identity.

*Volunteer manager Andrew:* I think one of the key statements I heard not very long ago was, when a group of people identified a problem and jointly came up with what they thought was a good answer and somebody said, 'well you can't do that', and they said, ' why?'. 'Well we haven't got any policies and procedures in place to actually allow you to do that!'. And the answer I got from one person was, 'I'm a Nike person, just do it! If it works, we've got something to write about. If it doesn't, we're going to save ourselves a lot of paper.' Now I think that's probably a very good country philosophy in that in the country, communities have been, for years and years and years solving their own problems and they're not scared to make a decision. You never know whether you're right or wrong until you've made a decision and that's one of the things that, I think, has frustrated a lot of country people because it seems to take so long to actually make a decision and get it to the action side of the paper.

The Moral Volunteers identity contributes to prestige gains because it draws on a rural discourse of rural people who value self-reliance, but also is likely to reflect the real interests of rural dwellers who often have needed to be self-reliant.

Andrew demonstrates this by relaying a story that shows how rural people represent themselves as doers, and identify as people who get things done<sup>24</sup>. The individual in the story is dismissive of policies and procedures and writing about things before there is anything to show. Rural people are represented as frustrated by the slow pace of change because they are essentially ‘action people’ by nature. This text piece reflects the rural/urban dualism where the rural doer identity provides status gains and reflects the key interest of the volunteer in helping the community.

The same ‘rural doer’ aspects of the Moral Volunteer identity are used to argue against pressures coming from ambulance services such as: organisational pressure for increased accountability, demands for increased training, or demands for increased rostered time.

*Anonymous volunteer (473):* Volunteers work for THE COMMUNITY. The amount of paperwork etc. required to please the [name of ambulance service] has taken the work level past a volunteer status.

Foregrounding the community helper components of the Moral Volunteer identity allows volunteers to resist new, paper-based workloads. This text piece clearly positions the volunteers with the community. By capitalising the words “the community” the volunteer is making a forceful statement. Volunteers are positioned as working for the community thereby challenging the authority of the ambulance service. The author claims that the workloads are ‘past a volunteer status’, suggesting that there is some finite amount of time that is suitable for a volunteer role. The complaints about workloads are qualified to indicate ‘office style’ work such as ‘paperwork etc.’ thereby not challenging the idea of helping the community but to create boundaries that limit organisational work needs of the ambulance services. However, while the Moral Volunteer allows volunteers to distance themselves from service administrative processes it also positions the

<sup>24</sup> While Andrew is a rural dweller and a volunteer, he positions himself outside the rural doer discourse and speaks of the Nike person’ as other. This is likely to be due to his position, which is aligned with high level decision making.

volunteer as responsible for ambulance services within local communities, which shall be discussed further later.

### **Rewards other than money**

The third feature of the Moral Volunteer identity, that volunteers do not receive financial reward for their contribution, is possibly one of the most taken for granted understandings of volunteers. Prime Minister Howard twice repeated that volunteers work for ‘no reward’ other than satisfaction. The following excerpt provides another example:

*New manager Sally:* ...but the special thing is that we have a group of dedicated people who do this job and they're not paid and that's remarkable.

The linking of the ‘special’ status of Moral Volunteers with non payment is pivotal to the Moral Volunteer identity, which Sally demonstrates by foregrounding volunteers as special and linking this to the fact that ‘they’re not paid’. They are special because they are dedicated and unpaid. The belief that Moral Volunteers must be unpaid draws on the good citizen discourses of recent political directions along with historical notions of charity. For neo-liberals, the emphasis has been on relying on the moral authority of traditional agencies such as churches and schools, and for communitarians a focus on the bonds of community that generate virtuous citizens who demonstrate the virtues of charity and giving (Rose 1999: 184-186). The virtuous citizen is then part of a broader governance move to shift community participation into being a largely moral role that is constructed through shared cultural values (Rose 1999:172) Such policy directions and discourses have supported the dominance of the Moral Volunteer identity and the emphasis has remained on spiritual rewards in opposition to monetary rewards, in a dualistic way where one negates the other.

The Moral Volunteer identity is therefore underpinned by the assumption of volunteer altruism which becomes a cultural entity with the ability to generate effects. The process of internalizing norms of altruism means that such forms of prosocial behaviour can be passed down from generation to generation (Gintis 2003:181). The centrality of altruism to the moral status of the Moral Volunteer identity generates effects and leads many volunteers to resist moves towards any

form of payment. The following survey respondent challenges changing attitudes and implies criticism of the changes:

*Anonymous volunteer (319):* It's a shame that volunteering for the satisfaction of the work is changing to the attitude of I must be and should be paid for what I do!

The volunteer respondent by using words such as shame highlights the loss of honour and prestige that comes with demands for payment. By suggesting that the new attitude is one of 'I must be and should be paid for what I do' the volunteer is positioning those with the new attitude as individualistic and thinking only of themselves. Payment is clearly against the ethos of the Moral Volunteer in this excerpt, who works for the community.

In volunteer literature and organisations there is a great deal of confusion around issues of payment for time, reimbursement for expenses and incentives or rewards, and the Moral Volunteer identity provides little clarity in these issues. The identity is firmly bounded by the characteristic of non-financial rewards. This issue will be looked at more closely in the next chapter as it is pivotal to the manner in which volunteers interface with ambulance services and the treatment they then receive.

A positive stereotyping of volunteers was evident in the Moral Volunteer identity through the context of the use of the word 'volunteer' and by the assumptions implicit in such usage. This section has described the key characteristics of the Moral Volunteer identity, the status rewards that altruism provides for volunteers, and the prosocial interests of volunteers that the identity represents. The relevance of the unexamined assumptions of disadvantage and rural action in the broader framing discourses of rural communities was also highlighted. The manner in which the Moral Volunteer identity positions volunteers as responsible for services was highlighted by their positioning within identity work; this shall be further examined next.

## **Representations of personal and community agency**

By taking up the Moral Volunteer identity, ambulance volunteers demonstrate personal agency, where individuals are interacting socially in a manner that is true

to their selves (Archer 2000: 293-294). The Moral Volunteer identity reflects the prosocial interests of many ambulance service volunteers. Linking the pleasure of helping with the community reflects the emotional benefits of social connectivity and membership in a local community. The Moral Volunteer identity therefore allows individuals who have prioritised social values of connectedness and caring above economic rewards to reflect these facets of their personal identity in a developing social identity through the role of volunteer ambulance officer.

However, a key effect of the Moral Volunteer identity was the way community positioning represents volunteers as having agency for service delivery. Linking with the community distances the volunteers from the economic, organisational world of ambulance policies and processes. It also allows services to step-back from the responsibility ambulance organisations have to deliver services. This is demonstrated within the following excerpt where Greg, a manager, talks about why volunteer training needs to allow volunteers onto the roster more quickly<sup>25</sup>.

*Manager Greg:* ...probably some of the pressures that come from the [volunteer] team as well, knowing that they're short and wanting people to support them on their roster as quickly as possible.

The absence of any organisational responsibility from this excerpt highlights the distancing of the organisation from service delivery within the rural community. Greg clearly presents the shortage on the roster as the problem of the volunteer team when he identifies 'they're short', and the volunteers want extra support on 'their roster' rather than 'we're short' and 'our roster'. In this way volunteers are positioned as being responsible for service delivery and meeting community needs.

The Moral Volunteer identity represents the volunteer as having agency, and places the focus on the desire of the volunteer to help. By highlighting the agency of volunteers the representation of volunteer responsibility is strengthened. The positioning of volunteers as from and for the community, and as responsible for

<sup>25</sup> The context of the excerpt is that this volunteer team problem causes volunteers to put pressure on new recruits.

providing community services is supported by the ‘taken for granted’ understanding of community disadvantage and the rural ‘doer’. Because the volunteers’ motivations of wanting to help the community are foregrounded in the Moral Volunteer identity the reasons for the existence of community disadvantage remain hidden. This is clearly demonstrated in the following excerpt from an interview with ambulance management personnel.

*New manager Danielle:* I don’t think we should lose the essence of why we’ve got people in country regions volunteering for Ambulance and that is they really want to actually keep up the health of their local community and they’ll do that when it’s required.

The volunteers are given agency by the use of the word ‘want’ and by Danielle saying ‘and they’ll do that when it’s required’. And what the volunteers want to do is “to keep up the health of their local community”. The normalising of the concept that volunteers would be responsible for the health of the ‘local community’ really only appears possible in marginalised groups, be they indigenous, economically disadvantaged or geographically disadvantaged.

Many volunteers subject themselves to this identity and present themselves as responsible for the community because there is a level of misrecognition by volunteers of the outcomes of the Moral Volunteer identity. Moral Volunteers gain prestige by linking with characteristics of good citizen, altruism, and self-reliance. The Moral Volunteer identity draws strongly on the naturalised concept that communities in need, club together to do what has to be done. Both the prestige gains and the ability to act out prosocial interests are therefore key benefits to Moral Volunteers. But inherent within this identity is a responsibility for rural service provision which the Moral Volunteer does not question because it fits their own identity of helping, rural doers and community. In this way they engage in ambulance volunteering as an act of personal agency to meet social and status interests, but as a result are positioned as having agency for local service delivery. This has resource implications for managers, volunteers and communities and underscores many volunteer troubles, discussed in the next chapter.

In summary the Moral Volunteer identity has three key characteristics: volunteers as special people, volunteers helping the rural community, and volunteers working

for rewards other than money. The Moral Volunteer is positively stereotyped by the context of the word ‘volunteer’ and by the assumptions implicit in such usage. Religious moral discourses frame unpaid helping activity as a highly moral activity which in hand with rural self-reliance discourses, provide the status benefits of the Moral Volunteer identity.

The Moral Volunteer identity is also linked to community participation discourses, with the inherent assumptions of communities of need. This community discourse draws on recent framing of the good citizen as someone who contributes to broader society thereby increasing the status rewards of the Moral Volunteer by being framed as good citizens. However, because the Moral Volunteer is represented as being of and for the community, they are also represented as responsible for service delivery.

Many volunteers subject themselves to the Moral Volunteer identity in the process of becoming a volunteer; furthermore this identity and its associated characteristics are promoted within many of the services. However, the Moral Volunteer identity also brings problems for volunteers because they are misrecognised as agents who are responsible for rural ambulance services. It is through the use of the Professional Volunteer identity that many volunteers try to counter these problems.

## **The Professional Volunteer – trained and working**

The Professional Volunteer identity foregrounds the role of ambulance officer and reflects the practical interests of volunteers such as knowledge and career rewards, as well as being able to have an ambulance service within their local area. The identity was stronger within ‘Traditionals’ than ‘Moderns’, but was still a prominent identity within ambulance services as it was able to be used in connection with a Moral Volunteer identity.

### **Key characteristics**

The Professional Volunteer identity draws on professional discourses which are reflected in the key characteristics of the identity. The Professional Volunteer

identity is used differently in identity work by managers and volunteers, and these differences were based on different representations of agency. The key features of the Professional Volunteer identity are:

- competency for ambulance work,
- the need for support equipment and services, and
- service delivery.

The professional volunteer identity is used by both volunteers and managers, but in this study it was used predominantly by volunteers to argue for resources. Managers and therefore formal organisational texts used the Professional Volunteer identity to demand volunteers meet training and service delivery requirements.

Competency was a key characteristic of the Professional Volunteer identity as used by both managers and volunteers. The increasing professionalisation of ambulance services and ambulance volunteers (Cooper 2005; Fahey, and Walker 2002) and of volunteer workforces generally (Baldock 1990: 68) directly link to increased training requirements. While the link between training and professionalisation has been established, the response of ambulance volunteers to this trend has not. Despite a strong discourse within ambulance services claiming that volunteers did not want extra training (a claim based on the Moral Volunteer identity), many volunteers valued quality training when it linked to competency (Fahey et al. 2003) and this was done through the Professional Volunteer identity.

Ambulance managers drew strongly on the issue of volunteer competency as a rationale for demanding volunteers follow organisational procedures. Services were positioned as authoritative and responsible for ensuring that volunteers were competent to perform duties by monitoring and surveillance. Competency was linked directly to both training and rostered duties in the Professional Volunteer identity. Only competent volunteers were expected to be on rostered duties, and volunteers were expected to undertake rostered duties in order to remain competent. New recruits were expected to complete certain levels of training, and a commitment to ongoing training was demanded of all volunteers. The



organisational documents, such as position descriptions and policy manuals, made this clear as these examples shows:

*Nearly modern Ambulance procedure manuals:* If a prospective volunteer is accepted to undertake Volunteer Training, his/her progress is required to be evaluated after 12 months or after assisting with twelve (12) cases.

...

To reaccredit volunteers must complete 12 Core Topics set by the organisation over a 12-month period. There is not a set number of shifts for each individual but the team is required to have a crew available 24 hours a day, 7 days a week. Volunteers who are absent from rostered duties for more than 6 months are required to demonstrate that [sic] are competent prior to being rostered for shift.

In these excerpts the volunteer is positioned as without agency or control in the recruitment process, as all the control and judgement remains with the ambulance service. The volunteer is referred to as only 'prospective' and as being 'accepted' to undertake training. The 'prospective' volunteer will be evaluated after a certain period or number of cases and the overall impression is of a tenuous position for the volunteer. Other documents from this service show that after completing training the final assessments have only two grades – competent or not competent. In this way the volunteer becomes judged. Linking volunteer competency to the need for volunteers to meet training and roster requirements was the major use of the Professional Volunteer identity by service managers and this worked to represent volunteers as needing control and judgement.

Managers used the competency focus of the Professional Volunteer identity to deal with risk management discourses; where amateur volunteers are a risk to be managed. The managers therefore position volunteers as needing to meet competency standards which are monitored and policed by the ambulance managers. The volunteers are positioned as needing to follow the rules and procedures of the organisation, and as being responsible for achieving and maintaining competency, and for filling rosters through being 'required to have a crew available'. This responsibility draws on the ethical discourses that underpin professional roles, that of an ethical standard for professional conduct (Archer 2000: 291). The service requires volunteers to be professional in meeting and maintaining competence while managers are positioned as having a duty to police the competency requirements.

For volunteers however, the competency characteristic of the Professional Volunteer identity reflects their knowledge, work and career interests and their collective interest in having a local ambulance service. The Professional Volunteer identity positions ambulance volunteering as service provision, or work. Those volunteers using this identity used the words 'work', 'jobs' and 'rosters' in comparison to the Moral Volunteer identity which uses wording such as 'helping' and 'assisting'.

The interests that appear to underpin the Professional Volunteer identity means that volunteers using this identity often argued to be treated as professional ambulance officers. The following excerpt demonstrates this:

*Anonymous volunteer (78):* As ambulance officers we work hard and do the same job as the paid staff – sometimes it feels like because we are called Volunteers we are not real ambulance officers.

The volunteer is arguing for recognition as an ambulance officer not as a volunteer. The respondent positions themselves as undertaking the same job as paid staff and yet complains that it doesn't 'feel' as though this is recognised. The resistance to the status quo evident in the above excerpt was found in much of the volunteer use of the Professional Volunteer identity where its use in identity work always had a tone of argument.

Many volunteers used the Professional Volunteer identity to challenge the standards and status quo of rural, volunteer delivered ambulance services. The relatively high value that rural populations place on having an ambulance service has been noted by other studies (O'Meara 2002) and this concern is strongly reflected in the Professional Volunteer identity. The identity was used to challenge standards and resource allocation, and generally positioned rural volunteer services as marginalised and inequitable.

For some Professional Volunteers, knowledge and skills for service delivery were the key interest and they therefore argued strongly (but not from a strong position) for better competency through improved training quality, standardised training, and better assessment procedures. This argument uses competency differently to the approach taken by managers who focus on policing

training and assessment criteria. The following excerpt provides an example of a volunteer challenging the adequacy and quality of the training provided by ambulance services:

*Anonymous volunteer (382):* Everyone passes exams/skills - no one fails, which means those who take time to learn and practice to get skills 100% are deflated when the next officer passes the same skills exam although obviously incorrect to all who are present! Pass levels need to be more stringent to maintain high levels of skill for those who need them - the patient!

By claiming poor skill assessment standards the volunteer respondent is able to challenge the standard of care that patients receive, and the ambulance service is held accountable by implication. The volunteer uses this criticism as a form of argument for improved training standards. The excerpt above demonstrates the way that the Professional Volunteer identity linked a focus on competency with concerns for standards of care, and criticisms of ambulance services for inadequate support. These features reflect both the interests of volunteers in having a quality local ambulance service and in gaining knowledge, and the use of the Professional Volunteer identity to argue for better standards.

When arguing for resources most volunteers implied that inequity and inadequate resources needed to be addressed by the ambulance service and supported their argument by reference to factors such as decreasing numbers of volunteers, low status, and poor service standards. Within the Professional Volunteer identity work framework the issue of financial payment was raised frequently and linked to service standards:

*Anonymous Volunteer (477):* It appears to me that if [the service] were prepared to put money into people there would be less concern regarding manning of volunteer stations. However, we are constantly told that it is not viable to pay staff on call in rural stations because they have a small number of calls. I have, however, done call in an urban station with 4 paid officers and no calls were received, therefore this argument is not sound. Surely all [people] are entitled to 1st class Emergency Response - not a 'there's no cover so you'll have to wait an extra 40 mins' which is the situation in our area.

While the employment and financial interests of volunteers are evident within the above excerpt, so too are the more collective interests of service delivery. The

volunteer implies a situation of inequity by comparison with urban ambulance stations, but does not argue from a strong position<sup>26</sup>. Volunteers used the Professional Volunteer identity to argue for more resources across all areas of ambulance service. Through the survey comments, many volunteers argued that training, equipment, uniforms, payment, and general organisational support were needed to support delivery of a professional service. The anonymity provided by the SUBC survey no doubt encouraged a more forceful tone of complaint and demand as a feature of many of the survey comments was their blunt and direct criticism of the ambulance services, as the following excerpt shows:

*Anonymous volunteer (342):* Put some money into equipment – if we want a decent sphygmomanometer, BP cuff or stethoscope we have to buy our own! That’s crap. Use the stretchers that USA have – the extenda legs fold under when you push them into the truck – reduce lifting. I am wearing the same 2 shirts I was issued with 7 ½ years ago – they are so thin they are nearly see through. My service [name] does not pay for dry cleaning or repairing uniforms – mine is so shabby it is hard to wear it with pride. To me the equipment and the AOs [ambulance officers] look 2<sup>nd</sup> rate and I don’t feel “honoured” any longer to be part of a service that seems to rate appearance and its officers (100% volunteer) so casually.

Inadequate resourcing is claimed in the excerpt above by both the description of old and neglected shirts and equipment, and by explaining that volunteers must buy their own equipment<sup>27</sup>. The respondent links a lack of equipment and poor uniform provision to occupational health and safety concerns and decreased reward in the form of pride or status. Linking feelings of being ‘2<sup>nd</sup> rate’ and a ‘loss of pride’ to poor equipment and uniforms suggests that status is a desired gain from the Professional Volunteer identity that requires volunteers be properly uniformed, equipped and trained. The organisation is accused of treating volunteers ‘casually’ and is clearly positioned as responsible for the problems described. The respondent uses a very direct and forceful statement at the beginning demanding more resources, and the strong tone is later supported by the use of the word ‘crap’. Overall the text piece exhibits strong argument against the

<sup>26</sup> The weak position of the discourse can be seen through modality, use of the personalised ‘I’ and reference to feelings and beliefs.

<sup>27</sup> By stating that volunteers must buy their own equipment the author is expecting that the audience would understand that by modern standards this is unusual or even unacceptable

status quo within ambulance services, a status quo that includes inadequately resourced volunteers.

These examples demonstrate how volunteers used the Professional Volunteer identity to argue for more resources by connecting competence, support resources and service delivery to discourses of inequity and poor resourcing. Managers and volunteers had different objectives in using competency discourses: for managers the objective was to establish training requirements and demand compliance, for volunteers the objective was to argue for more resources.

The Professional Volunteer identity reflects the knowledge and service delivery interest of the volunteers, and also the status loss when volunteers are treated inequitably in comparison with paid staff. However the strength of the criticisms found within the use of the Professional Volunteer identity suggests that volunteers are not getting their interests met, and that while the identity was used to support arguing for more resources, it was from a weak and resistant position. The next section looks more closely at the evidence that the Professional Volunteer identity was not a dominant or strong discourse in ambulance services.

## **Reflecting and representing resource and status interests**

The Professional Volunteer identity reflected both the practical interests of volunteers in delivering a local ambulance service and the weakness of the volunteer position. Ambulance volunteers engaged with the identity to meet some of their prioritised interests. However, the strength of the complaints under the identity and the weakness of Professional Volunteer's position when making those complaints show that this is a resistant discourse. Because of this weakness the identity does not greatly help volunteers to meet their personal and collective interests.

The work based benefits of the Professional Volunteer identity, those of gaining knowledge and skills and valued employment (albeit unpaid) as well as a professional status, are all reflected in the Professional Volunteer identity. As well, the broader practical concern of ensuring a local ambulance service is strongly reflected in the volunteers' use of the identity. The Professional

Volunteer identity therefore allows individuals who have prioritised the work values of service delivery, professional standards, and knowledge gains to reflect these facets of their personal identity through the role of ambulance volunteer. For these volunteers, joining the ambulance services as a volunteer was an act of personal agency in meeting practical work based interests, though for some perhaps a second rate alternative to paid employment.

However, the complaints and criticisms within the Professional Volunteer identity work show how the services were failing to meet many of the volunteer work based interests. The criticisms about the standards of training and assessment show that many volunteer were not gaining the knowledge and skills they had hoped to get from the services. For those volunteers whose interests were focused on ensuring a local ambulance service, the complaints about resources and service standards show that this interest was not being met. And the demands for payment and employment suggest that for some volunteers the ambulance volunteer role as an entrée to employment also did not meet expectations.

While the criticisms show that some volunteers were challenging the status quo in ambulance services, several discursive practices show that their resistance was not based on a collective strength. Firstly, the Professional Volunteers' arguments relied on aligning rural volunteers and populations with stronger groups which suggests a weakness in the collective ambulance volunteers' position. By highlighting the ways that volunteers were the same as paid ambulance staff, or that rural areas had the same needs as urban areas, the Professional Volunteer could then claim inequitable treatment. Comparison was used to compare the treatment of like groups. Volunteers identified 'with' not 'against' paid staff to support claims for resources, which is opposite to the special 'othering' found in the Moral Volunteer identity. The following excerpts demonstrate how volunteers attempted to 'join with' paid ambulance officers or urban centres:

*Anonymous volunteer (516):* Volunteers carry the same responsibility as paid staff, and are accountable.

*Anonymous volunteer (66):* Isolated communities should have access to the same level of clinical care as larger centres, volunteers should be trained and equipped to provide such care.

Volunteers are either compared with paid (professional) staff or rural areas are compared with urban areas, and the comparison is used to support claims of the same responsibilities or the same needs for volunteers and rural people. By identifying with paid/urban people the volunteers are arguing for inclusion in the benefits that they perceive the paid/urban receive.

By positioning rural populations as having the same needs as urban populations the isolation of the rural community could be foregrounded, allowing the claim that isolated communities should have the same level of care as larger centres. The volunteer in the above excerpt uses community discourse differently to the Moral Volunteer identity, because 'isolated community' is not linked to discourses of 'rural doers' making do. Instead 'isolated community' is used as a rationale for demands for the provisions of adequate training to allow equitable services. The linking of isolation with clinical care needs is a complete move away from the strong rural community discourse of the Moral Volunteer identity and foregrounds and problematises the 'disadvantaged community' which is normalised and hidden within the Moral Volunteer identity.

A second discursive practice to show the weakness of the Professional Volunteer identity is the way that it moves away from some key characteristics of the Moral Volunteer identity without directly challenging the strong moral discourses. For example, the Professional Volunteer identity was framed so that even when asking for payment volunteers did not directly challenge the moral status of the Moral Volunteer identity. The following excerpt suggests that ambulance volunteers should be paid<sup>28</sup> but in a manner that does not challenge the strong moral/unpaid links:

*Anonymous volunteer (257):* Majority of city officers are paid, I would like to see our rural VAO which have the same level of qualifications also to be paid. We lose too many good officers due to the high expectations being placed on us as a life-saving service, yet nobody is prepared to pay them...

<sup>28</sup> This volunteer request for payment was not an isolated voice in the SUBC study responses, but instead represented an emerging discourse, particularly in services that had high training requirements.

The volunteer attempts to challenge the normalisation of unpaid rural ambulance officers through this text piece. Volunteer professionalisation is linked to the need for payment. The respondent supports the argument for volunteer payment by positioning rural ambulance volunteers as the same as paid city officers and therefore implying inequity in the non-payment. The previously identified characteristics of a focus on work are present, where the text positions volunteers as qualified officers firstly, and does not link into helping community discourses. Instead the context presented is that of a 'life-saving service' which foregrounds the interests of volunteers to have a local ambulance service.

The text also resists the Moral Volunteer discourse of 'free will' by implying an element of coercion. Coercion is suggested by claiming that unpaid officers are pressured by high expectations, and by framing the Professional Volunteer as working unpaid out of necessity not from free will. The volunteer is represented as having the agency to withdraw labour but that this is only done when expectations become too high. A direct challenge to the moral/unpaid status of the Moral Volunteer is therefore avoided by linking volunteer resignations to 'high expectation', not lack of payment, and by foregrounding work instead of helping. Inequity and coercion are strong claims made within the Professional Volunteer identity, and yet they were not heard within ambulance services.

The third discursive practice that points to the weakness of the Professional Volunteer identity is found in modality, which is the level of commitment a speaker makes to a statement. In all excerpts presented, despite clear complaints, the arguments are weakened by the subjective modality that frames the complaints as opinions. In the above excerpt this is expressed in "I would like to see". By linking the claim for payment to a personal opinion the respondent does not draw on a collective and dominant 'we' in the manner that was seen in the Moral Volunteer identity, thereby indicating the less dominant status of the discourse (Fairclough 1992: 159; 2003: 169). Overall, while they argue bluntly for better equity for rural volunteers, the Professional Volunteer identity is clearly not a dominant discourse, nor coming from people in positions of authority.



The framing of the Professional Volunteer identity also permitted challenges to the appropriateness of the volunteer model of delivering ambulance services. This argument was proposed by a small number of survey respondents as in the following excerpt:

*Anonymous volunteer (615):* The concept of volunteers covering essential services as ambulance in rural areas should be reviewed, as due to reduced volunteer numbers, we are not offering a service that is up to standard and expected by the public.

While many volunteers linked into the quality service discourse to demand extra resources, only a few suggested that volunteering was no longer an appropriate model. Weak modality<sup>29</sup> shows this is not a strong discourse. The discussion of ceasing volunteer ambulance services, may indirectly acknowledge the difficulty of linking payment and volunteers together. It was more common to find volunteers identifying as professionals and discussing payment, than discussing ceasing volunteering.

In summary, the Professional Volunteer identity when used by more dominant personnel such as managers positions volunteers as needing to be competent, which requires imposed assessment and judgements. Managers foregrounded training and standards in the identity, and matters of equipment and organisational support were often backgrounded or not evident. The Professional Volunteer identity, when used by volunteers, positioned volunteers as professionals, and foregrounded their needs for training, equipment and organisational support to achieve competence. The volunteer use of the identity exhibited strong evidence of resistance, through criticisms of the organisation, and avoidance of, or subtle negation of the Moral Volunteer identity.

The safety of patients was presented as a key goal in the Professional Volunteer identity as used by volunteers. Volunteers were represented as having agency for achieving this goal by both managers and volunteers. While volunteers attempted

<sup>29</sup> The text piece is written in the passive voice and the author shows weak modality with the text straight away by talking about 'the concept' needing 'review'.

to position a shared responsibility for service provision by stressing the role of ambulance services in supporting them, they still essentially represented themselves as the key agents in rural service delivery.

Representing volunteers with agency for service provision also occurred with the Moral Volunteer identity and this allowed managers to link the training requirements of the Professional Volunteer identity with the Moral Volunteer identity. These two identities therefore could exist together within ambulance services (though not the critical volunteer version of the Professional Volunteer identity) as they supported the interests of managers. The Moral and Professional Volunteer identities were the major ambulance volunteer identities to emerge from the data and both had long histories of use suggesting they had reached a situation of morphostasis. However there were two newer identities that were evident in ambulance services: the Staff Volunteer identity, and the Self-interested Volunteer identity, which showed how changing interests and conditions had opened the way for identity changes.

## **The Staff Volunteer – unpaid organisational member**

The Staff Volunteer identity reflects the managerial interests of ‘new managers’<sup>30</sup> in ambulance services and it draws heavily on managerial and equity discourses. It is an emerging identity within ambulance organisations which was most evident in the interview texts of ‘new managers’ of ‘Nearly Moderns’ and ‘Moderns’. While the Staff Volunteer identity was largely used as a discourse of change for increasing volunteer resources, very few volunteers used the Staff Volunteer identity either because it positioned volunteers as low status organisational members or because they mistrusted its polyvalence.

### **Key characteristics of the Staff Volunteer identity**

The Staff Volunteer identity is used largely by ‘new managers to promote change, and occasionally was used by volunteers to support equity arguments. Volunteers

<sup>30</sup> As described in the typology ‘new managers’ had managerial experience in other fields, and managerial training, mostly found in ‘Nearly Moderns’ and ‘Moderns’.

were the objects of the identity because it was used mainly by managers to talk about volunteers. The Staff Volunteer identity had two key characteristics:

- volunteers as needing organisational support that was equitable with paid staff, and
- volunteers as organisational members.

Volunteers were aligned with paid employees through the Staff Volunteer identity, which drew on new managerial and equity discourses for framing volunteers. The Staff Volunteer identity positioned volunteers within the organisation, unlike the Moral and Professional Volunteer identities which positioned volunteers within the community. This positioning allowed the Staff Volunteer identity to be used to argue that the organisation was responsible for ambulance volunteers, and that volunteers needed to be covered by adequate policies and safe procedures that were equitable with paid staff.

Equity discourses allowed ‘new managers’ to challenge the inequitable status quo. At the commencement of this study, a lack of policies and procedures for volunteers, different resourcing and different processes for paid and volunteer staff were normalised within services (Fahey, and Walker 2002). By positioning volunteers as staff then factors such as lower levels of organisational resourcing, limited coverage with policies and procedures and less overall support services could be challenged and problematised. The following excerpt problematises the management and resourcing of volunteer services as inequitable:

*New manager Anne:* I think...this whole issue we’re dealing with right now is one of those issues in that they haven’t wanted to really resource volunteer services. When you look at the organisation in comparison to how they’ve structured the services provided to the metro stations and the number of people-dedicated resources to that part of the workforce which is, I think, half the number...there is a lot more resources for the metro stations and there’s not enough put into the volunteer staff.

Anne positions herself as needing more resources to manage volunteers on the basis that volunteer services are inequitably resourced within the organisation. Responsibility for inadequate resourcing is placed with ‘they’ and in context this is likely to refer to more traditional executive managers. While the inequity in resourcing between the volunteer and paid services, and between rural and

metropolitan areas are the theme of the text, the managerial interests and the weakness of the 'new managers' are also evident.

While the Staff Volunteer identity did assist in gaining extra resources for volunteer services the discourse was still not a dominant one. In the above excerpt it can be seen that Anne does not speak from a position of strength because she exhibits awkwardness with the topic under discussion. Anne is hesitant, hedges her comments, and uses 'I think' frequently which lowers the force of her statements and shows awkwardness in criticising resource issues. So while 'new managers' challenged the status quo and drew on equity discourses, they were not speaking from a position of dominance.

While the Staff Volunteer identity supported volunteers they were the objects within the identity and did not have agency to stop this representation. The following excerpt highlights how the Staff Volunteer identity was felt to be in the volunteers interests:

*New manager Sally:* Very much so, and at times people even still resort back to, "How come we're reading this and there's not mention of volunteers?" and it's because we've said time and time again that it's about our staff and by calling them "staff" we believe that there's more recognition for them as volunteers because they're a fundamental part of the business and that's actually coming from volunteers, that they're feeling uncomfortable if they don't see the "v" word.

For 'new managers' the Staff Volunteer identity was about organisational change and the need to 'integrate' volunteers by developing new policies and structures. The Staff Volunteer identity was therefore linked very strongly to the process of change and to efforts by new managers to improve the resources and processes supporting the volunteer services. It was in the interests of the 'new managers' to promote volunteer interests as they were responsible for volunteer services or volunteer management, and therefore had reason to align themselves with volunteer support interests.

Therefore 'new managers' argued for volunteer resources, but not necessarily for volunteer interests. As noted in the Professional Volunteer identity, clearly some volunteers had engaged with volunteer work in the hope of a future career in ambulance services, which in most services did not eventuate. In some cases this

was because the volunteer recruitment processes were so different to those for paid staff that they created a barrier to volunteers wanting paid employment. New managers had begun to review this process in 'Nearly Moderns' and the following highlights how managers' interests may overlap but not perfectly align with volunteers' interests:

*New manager Danielle:* My wanting to align that Human Resources function is that we can actually maximize, I guess, our potential with more people working together and you're not actually operating two separate process 'cause the volunteers get medically assessed, the careers get medically assessed, slightly different! We do recruitment for volunteers, we do recruitment for careers, slightly different because of what's required but the big problem is for volunteers that then see a career pathway into paid work in [organisation], we actually make it literally impossible for that to happen. So by aligning the processes they're actually getting exposed to what is the sort of the standard of recruitment selection but made aware of why its higher for career because they'd be lifting and using stretchers a lot more than what they would if they were volunteer, that sort of stuff. So and sort of personality profiling, but we probably, we don't do with volunteers what we do with career. So the reason for bringing them together is actually to physically, partly give a message, I think, that they both do the same things...

The theme here is improving the career pathway for volunteers into ambulance services, which suggests a promotion of volunteer interests. However, issues can be hidden by foregrounding different matters, in this case expectations were foregrounded and real career paths hidden. Danielle highlights how differences in volunteer/paid staff recruitment processes are a barrier to volunteers' employment. But Danielle foregrounds the 'false expectations' of volunteers as the problem when she says "...but the big problem is for volunteers that then see a career pathway into paid work...". The theme of the excerpt is that the different recruitment processes do not allow volunteers to understand the different standards applying for paid staff recruitment processes. The whole issue of some volunteers wanting paid employment and ambulance careers that are inaccessible is skimmed over. By aligning the two processes Danielle suggests it will be easier for volunteers to see the difference in standards. Raised expectations are foregrounded as the problem and not the barriers to volunteers in meeting their interests of paid work through volunteering. 'New managers' while bringing changes to services, some of which benefited volunteers, were not actually working to meet volunteer interests, so much as to meet the management interest of a sustainable volunteer workforce.

Volunteers were wary of the use of the Staff Volunteer identity within ambulance services either because it was polyvalent and used by managers, or because it lowered the status gains of volunteering . The following excerpt details how volunteers feel they have experienced the polyvalent use of the Staff Volunteer identity and the subsequent cynicism of volunteers:

*Volunteer management Gwen:* So we talk career and volunteer. Career is paid; volunteer is volunteer, but we're all supposed to be staff and it's really amazing we've just had [a study] done for example and within that it all depended on what point they were trying to make, whether we were staff or not, you know, and you can't have it both ways; ... And what's happening at the moment is the fact that in (the service) there aren't a lot of policies anyway and so volunteers are treated one way and career staff are treated another way because of the culture that's gone through, and what we're saying is let's put the staff in brackets and there will be differences but for example conflict, performance appraisal, you know, those things that make a business work, there shouldn't be any difference.

*Volunteer management Fred:* It's like Gwen's saying, it's really you're told you're staff but you always get the impression oh, you're walking arm in arm up to the front door but as soon as you get to the front door they say, "No, your entrance is around the back." And that still exists on occasion. We're trying to remove that because we feel, and you get told, that you're important.

Both speakers in the above excerpt suggest that the ambivalence and blurred boundaries around the Staff Volunteer identity are strategically used to benefit the service. Both resist the idea that Staff Volunteers do receive equitable treatment and provide supporting evidence. Gwen uses a practical example to stress this while Fred uses a metaphor. Gwen gives the example where volunteers were labelled as staff depending on the point being made in a report and argues against this by claiming 'you can't have it both ways'. Fred uses the metaphor of walking 'arm in arm up to the front door' only to be told to use the back entrance. This metaphor is quite powerful, as it draws on historical ideas of servants using the back door, creating imagery of volunteers as second-class citizens. However Fred softens the initially powerful metaphor by adding 'And that still exists on occasion'. This follow up statement may be because the situation has improved for volunteers, but more likely because Fred did not feel in a dominant enough position to openly criticise management.

Both Gwen and Fred position themselves as change agents<sup>31</sup> in a difficult environment, but not as powerful change agents. They are sceptical of the risk of losing sight of the ‘volunteer’ under the term staff.

*Volunteer Management Gwen:* what we’re saying is – and especially what we have been fighting for – is that within somewhere there needs to be something that says there is a volunteer component within [our ambulance service]

Gwen’s use of the word ‘fighting’ (and in other parts of the interview they use words such as ‘trying’) to describe their change actions suggests that their change actions are a struggle and that there is resistance to their proposed changes. Gwen is concerned that volunteers will be lost under the title of ‘staff’ and proposes that ‘staff’ be an additional category to career and volunteer. “Career is paid; volunteer is volunteer, but we’re all supposed to be staff... what we’re saying is let’s put the staff in brackets”. In this way Gwen is accepting the inevitability of the Staff Volunteer identity, but suggesting a strategy that will allow volunteers to remain visible within ambulance services. Volunteer wariness to the Staff Volunteer identity may not be misplaced as the identity was used most by those in positions of authority, with more power over discursive practices, and therefore the ability to use the discourse to benefit their own interests.

The Volunteer Staff identity reflects the interests of ‘new managers’ as they incorporate managerial discourses into ambulance services. These interests overlap with many volunteer interests because ‘new managers’ (as interviewed for this study) were placed in positions that were responsible for the volunteer workforce or rural volunteer delivered services. However volunteers were the objects of the discourse and were wary of the polyvalent nature of the identity, where volunteers could be made visible or invisible depending on the interests of the managers. Despite this cynicism the Staff Volunteer identity did bring new resources for volunteers and new ideas for thinking about a volunteer workforce.

<sup>31</sup> Neither Gwen nor Fred were ‘typical’ volunteers in that they had become involved in driving change.

## Reflecting and representing changing interests

The Staff Volunteer identity reflected the practical interests of ‘new managers’ in looking after their work interests and was used deliberately to effect change. The use of the term ‘staff’ instead of volunteer, was a deliberate strategy to gain resources for volunteers by avoiding the barriers of the Moral and Professional identity. Volunteers were sceptical of the identity but some did draw on it to argue for resources. The Staff Volunteer identity worked to either avoid the barriers of the Moral Volunteer identity, or to open up the discourse of volunteer workforce to managerial concerns. This opening up of ambulance volunteer identities in turn created some potential lego-juridical difficulties at the interface between volunteers and ambulance services.

The Staff Volunteer identity was overtly political and highlights how the ‘new managers’ positioned themselves as fighting against dominant ‘traditional manager’ interests. The following quote identifies perceived problems associated with using the term volunteer:

*New manager Sophie:* The whole area of resourcing for the regional workforce is enormous and has never been properly addressed because the moment you say the word volunteer, everybody shuts down. That’s why I don’t use the word.

‘New managers’ needed to break the barriers around the dominant volunteer identities in order to engage ‘traditional managers’ in discourses about resourcing volunteers. Sophie directly claims a problem with using the word ‘volunteer’ when seeking resources for rural (i.e. mostly volunteer delivered) services. She suggests the lack of resourcing is an ‘enormous’ problem, and directly links this to the term ‘volunteer’. The claim that ‘everybody shuts down’ when resourcing is raised in connection with volunteers suggests that the dominant Moral Volunteer identity is a real cultural entity that produces significant structural effects for volunteers. While who ‘everybody’ is, isn’t specified, the reader must assume that everybody includes those who have the power to allocate resources, and this is likely to be either ‘traditional managers’ or government funders of ambulance services. The power of Staff Volunteer identity work to affect interests and initiate change is related to the way it allows access to new managerial and equity discourses.



However, ‘new managers’ also introduced new tensions and managerial concerns through the use of the Staff Volunteer identity. Because the Staff Volunteer identity was used to align volunteers more closely with paid staff there were difficulties in linking with the long-standing community assumptions of the Moral Volunteer identity. Instead new issues around volunteers as employees were uncovered. Some ‘new managers’ believed this may pose future legal problems:

*New manager Danielle:* And I think that there’s premature extremes, one is that ...are people getting to the point..., I really value our volunteers, but we’re getting to the point where we’re starting to get really confused about what is a volunteer and they’re looking, as I said to you over the phone, they’re looking a lot like staff and employees in terms of common law of employment. And I think that in a way I feel like we’ve almost lost the essence of what a volunteer is because, you know, the uniform, the training, everything is covered. Which is great but now we’ve got to be careful about which policies they do actually come under because to me then there is absolutely no difference between them and an employee.

Interviewer: mmm, and is that something that you think...is discussed?

*Danielle:* No. No and I’m not going to, given I’ve got industrial relations sitting with me, I need to be careful!! No, I’m actually, a little bit in the back of my head, a bit fearful for the first case where someone actually says, well I’m actually an employee rather than...so no it’s not discussed.

The legal ramifications of a volunteer workforce have not been thoroughly considered within ambulance services. It is only quite recently that issues around the legislative protection for volunteers have been considered (Omar 1998). More specific to the volunteer service interface are Danielle’s concerns about how far a volunteer can be incorporated within an organisation without becoming an ‘employee’ and the legal implications for ambulance services if volunteers should claim employee status. However, she is clearly not keen to discuss the issue openly and indicates forcefully that it is not an open topic within ambulance services (‘No. No.’). The uncomfortable nature of the topic is also shown by her hesitancy, and hedging in the excerpt, and the low force and clarity of the theme.

By positioning the services as responsible for volunteers, new complications and issues are raised. If they are staff, volunteers become more visible in policy and procedure terms new issues around risk management are opened up. It is ‘new managers’ with knowledge about the services’ legal and judicial obligations to employees who understand the problems involved in either highlighting or not highlighting the Staff Volunteer identity. Danielle highlights her own difficult

position in that she is nervous about industrial trouble that may arise from raising the issue, but is equally concerned about ‘the first case’ where someone claims the rights of an employee not a volunteer. Danielle suggests that ‘we’re starting to get really confused’ about volunteers and links this to the Staff Volunteer identity.

Positioning the volunteer workforce as a responsibility of the ambulance service was a key difference between the Staff Volunteer identity and the Moral and Professional Volunteer identities. Representing volunteers as responsible for ambulance services is an assumption of agency as it is expected that volunteers and communities have the capacity to effect service provision or volunteer support. However, by positioning the ambulance services as having legal responsibilities for volunteers under the Staff Volunteer identity, the lack of resources and policies for volunteers could be foregrounded as service obligations. Equally, by positioning volunteers within ambulance services the responsibility for service delivery was placed with the organisation and not the community. The key role of agency in ambulance volunteer identity work is considered in greater depth in the following chapter, but at this point it is the consequences of differences in the representation of agency that the analysis of volunteer identities has highlighted.

In summary, the Staff Volunteer identity is a new identity that positions the volunteer within the ambulance organisation. It is used by ‘new managers’ to argue for more resources and to improve service processes for supporting volunteers. The Staff Volunteer identity works to represent ambulance volunteers as the responsibility of the ambulance services in a way that the other identities do not. The organisation is positioned as being responsible for both the delivery of service and care of the volunteer workforce. This identity work has achieved some increase in resources for volunteers by drawing on discourses of sustainability and lego-judicial responsibility for workers. Staff Volunteers are increasingly incorporated under service policies and procedures, and discriminatory processes, such as the difficulty in accessing paid ambulance work, are beginning to be dismantled. But the benefits for volunteers are limited to those areas where volunteers’ interests overlap with ‘new managers’ and because of resistance to the identity it is possible that ultimately changes may not deeply affect the status quo.

There is resistance to the use of the Staff Volunteer identity by both volunteers and ‘traditional managers’. Some volunteers exhibited cynicism towards the way that the Staff Volunteer identity was used in a polyvalent manner to suit changing needs. ‘Traditional managers’ resisted the identity because it challenged the status quo by requiring new funding or changed financial priorities, with accompanying conflicts with established interests. Even ‘new managers’ experienced some difficulty with the Staff Volunteer identity as it resulted in uncertainty about where the legal boundaries between volunteers and employees could be drawn. These concerns however, were well hidden, and instead it is the fears and concerns of a more demanding self-interested volunteer that are openly discussed in ambulance services.

## **The Self-interested Volunteer – demanding and wanting**

The Self-interested Volunteer identity was a fourth and recent identity used in ambulance volunteer identity work. It draws on the discourses of modernity and though not a prominent identity in ambulance services, elements of the identity can be found in academic and management literature that discusses modernity and generational trends (see for example Zappala et al. 2001). The Self-interested Volunteer identity was used in ambulance services mostly to depict volunteers who were ‘other’ to the Moral Volunteer; depicting a more demanding and assertive volunteer focused on his/her own interests. The Self-interested Volunteer identity was used by both volunteers and managers to explain the reasons for changing volunteer demands, or to project and predict the future impact of such changes. This identity work is of relevance to this study because the key characteristics of the Self-interested volunteer work to constrain Moral Volunteers.

## **Key characteristics – demanding and modern**

The context of change and modernity causing uncertainty or even fear over the future of volunteering was reflected in the Self-interested Volunteer identity, but was also used in identity work to promote the dominance of the Moral Volunteer identity. The key features of the Self-interested Volunteer identity are:

- a focus on modernity and changing demographics,
- a more demanding volunteer, and
- a volunteer who is positioned in a family and social context.

Self-interested volunteers are represented as having different demographic characteristics to Moral Volunteers. They are likely to be categorised as younger and busier people who do not wish to undertake community service. The following excerpt demonstrates this changing demographic with a future fear for volunteer services:

*Anonymous volunteer (295):* Small country town 30 min away from professional [ambulance station]. On a major interstate highway with heavy traffic - attract large numbers of campers, tourists etc during holidays (up to 7000 at Easter). Foresee future recruitment problems - present group of 6 are between 45 and 60, younger people don't wish to commit extra time to community service.

The prevalence of older volunteers in the team described above is not linked to the lack of younger people in the service. Instead younger people are represented as not wishing to undertake community service. The description of the population needing servicing (reference to the traffic and highway is made as a pointer to the high likelihood of traffic accidents) is used to justify the volunteer's fears for future volunteer services through inability to recruit new members. Others point to the likelihood of the Self-interested Volunteer being from urban areas and having more self-interested motivations

*Manager Leroy:* ...stations close to metro area they're getting a lot of people from the city coming to them, you know, the [place name]s, the ....., the ....., have got a lot of people from the metropolitan area coming to them, and some of these people are doing it for different reasons I believe. I believe they're doing it for certainly a little bit to provide a service but they're doing it more for a "me" reason.

The Self-interested Volunteer is represented as driven by personal interests, and by implications is different to the Moral Volunteer and is therefore an unknown quantity. Leroy's text piece draws on an identity of the more selfish urban volunteer though he softens this criticism with the subjectifying "I believe". This softening could be because it is not a dominant discourse or because Leroy is uncomfortable with linking volunteers to 'me' motivations.

The Self-interested Volunteer identity positions volunteers in a broader social setting than the other ambulance volunteer identities. Both Moral and Professional Volunteer identities position the volunteer within communities, the Staff Volunteer identity positions volunteers within the organisation, but the Self-interested Volunteer is positioned within society. This positioning acknowledges a more holistic volunteer with social roles of family and work that are outside volunteering activity. Time constraints and lessening time commitments by volunteers can be explained partly by acknowledging these additional aspects of volunteer lives. Modernity discourses which link to the changing social situations of volunteers are also represented as creating a problem of limited time or limited finances for volunteers. The following excerpt demonstrates the linking of generational change and social change to a changing volunteer environment:

*Volunteer management Gwen* as far as volunteer goes another reason that it's changing is because volunteers are different now. To when I joined in 1990 to now volunteers have huge expectations. They want answers. They're results-driven and they're not silly, and they have this much time that they can spare and they want value for money. Now, that is totally different from the people that were housewives, came from a one-family income and so the kids had gone to school and so they could put 24/7 on the road, etc. etc. Now we're living in an environment that both family members, if there are two family members, it's often casual employment, they are often sole parents. So the whole nature of those volunteers that we're talking about has changed to what it used to be.

The limited commitment by the Self-interested Volunteer identity draws on generational discourses by stressing the impact of a more individualistic younger generation and a changing society. Gwen clearly draws on generational discourses to identify the Self-interested Volunteer and uses contrast to make her point. For example she draws a picture of a focused, intelligent group with limited time and contrasts this with the image of housewives with time to spare while the kids are at school. However, Gwen also paints a contrasting social picture of those with less financial security and less time, drawing up the image of casual employment or both family members working. The following excerpt reinforces this:

*Anonymous Volunteer (344)*: Finding the extra time to volunteer our services is the biggest hurdle due to full time employment and family commitments.

The Self-interested Volunteer is not necessarily represented as more selfish, but instead positioned within a broader social setting where social changes have left

volunteers short on time and/or short on money. In this way the Self-interested Volunteer identity is positioned within a changing social and family context that provides rationales for why volunteers have less time and are more likely to value their time.

The limited commitment of the Self-interested Volunteer is also explained by reference to modernity discourses with images of a world moving faster and faster. The fast pace of life is used to explain why new volunteers have problems in attending training, and why the organisation has difficulty attracting recruits. This survey respondent links the fast pace of the world to problems with skill levels:

*Anonymous volunteer (222):* Finding time to maintain your skill level is getting harder as the world is moving faster.

The talk of a faster pace is part of everyday language, and as this excerpt shows there is a sense of increasing pace, the problem is not just that the world is faster now, but that it is becoming ever faster. The use of the terms ‘getting faster’ and ‘moving faster’ demonstrate this trend, which problematises the future. If it is harder now, what about next year?

The Self-interested Volunteer is represented as more interested in reciprocal arrangements and benefits. This links with the academic and management generational change literature suggests shifts towards volunteers who only wish to contribute skills in short bursts of activity and who expect a reciprocal arrangement with organisations they volunteer for (Wilson 2001). This group are often represented as without long-term commitment to organisations, but instead will commit in short bursts often with an eye to the reciprocal benefits.

In ambulance services the Self-interested Volunteer identity is represented as having less commitment to ambulance services. The pressures of their lives are seen to take priority over ambulance volunteer work:

*Anonymous Volunteer:* Management at training level have become dictatorial and this attitude will cause volunteers to leave the service as they are unable to accept extra work loads on top of very busy committed lives. The service at large now

expects volunteers to train through to intermediate level but not all volunteers want that much commitment.

The Self-interested Volunteer identity paints a picture of a more demanding type of volunteer, who questions the organisation and status quo and who does not use patient safety as a rationale for demanding volunteering benefits. This emphasis on assertiveness and personal interests are a strong break from the dominant Moral Volunteer identity which is likely to explain why even change agents such as Gwen did not align themselves with this identity. Generally, the Self-interested Volunteer is 'other' to the author as in the excerpt above and below: Gwen below discusses how she perceives the requirements of new volunteers who are 'other' to herself:

*Volunteer manager Gwen:* they'll work for it because at the end of it they'll have certificates in assessment and workplace training, more than likely; mentoring, more than likely; any other leadership management that they can get, more than likely. You put that on a CV and you've got something to show for it, and that's what we've been saying. If you have educated volunteer team leaders you will keep them, you will encourage other people to go because you have that piece of paper and then that can help you move on.

Gwen is using the Self-interested Volunteer identity to advocate for improved career paths for ambulance volunteers, but still positions them as other to herself. In the excerpt she argues that provision of training with recognised qualifications will assist the career aspirations of volunteers and in turn the recruitment and retention of volunteers. Her comment 'you put that on a CV and you've got something to show for it' is a reference to the benefits of a qualification in return for the work and training time committed as a volunteer. In the last sentence she posits that the training will help keep volunteer team leaders, attract other volunteers and help some volunteers to move on, which draws on the idea that volunteers won't commit for long periods and need to be attracted by some benefit. This argument draws on the discourse of the 'enterprising self', life-long learning, and the self as project (Rose 1999: 161) and is in part a resistance to the Moral Volunteer identity, where the volunteer is positioned as an amateur helping the community. This life-long learning is also different to the Professional Volunteer arguments for more training as they link the need for extra ambulance officer training to competence for the benefit of the patient, though overlaps with those volunteers with paid work interests.

The Self-interested Volunteer identity problematises the future of volunteering and positions those who are 'other' to the Moral Volunteer in a negative stereotyping. This places the Moral Volunteer in a good/bad dualism with the Self-interested Volunteer. Self-interested Volunteers are presented as a problem firstly, because organisations requiring volunteers will increasingly struggle to attract volunteers, as people are represented as too busy and not as interested in the community. Secondly they are framed as problematic by being represented as more demanding, requiring services to increasingly reward and recognise volunteers. This framing of the Self-interested Volunteer as bad, and/or a problem helped to minimise the use of the identity within ambulance services, as managers worked to maintain the dominance of the Moral Volunteer identity or 'new managers' worked to introduce the Staff Volunteer identity.

Managers further problematised the Self-interested Volunteers by representing them as a future danger and threat to services. However, when managers attempted to discuss this at any length they experienced a high level of difficulty in supporting the critical argument against Self-interested volunteers. The following excerpt demonstrates a high level of difficulty in blending the Self-interested Volunteer identity with discourses of reciprocity:

*Traditional manager Bob:* I think volunteer expectation is going to be a huge driver of change. We have yet to see in volunteers the most significant impact of generational expectation -changes that we're seeing in our paid workforce right now and we're starting to see that coming through, where the expectation of the workforce, the loyalties and that are not automatic, but people I don't think are just going to do it because that's what's expected and there's going to be quite a significant demand, I think, placed by volunteers on what they expect for the time which they're giving. Clearly they're not in a one way and that's coming through very strongly but that isn't the motivator for them otherwise they wouldn't be volunteering but they are going to look for significant recognition and support in that so that we mitigate the majority of the risks that they face and actually recognise the contribution that they're making.

The anticipation and description of changing expectation of the new volunteer are clear in the above excerpt. The changes are clearly seen to be caused by 'generational expectation(s)' which draws directly on generational discourses. These changes are described as 'loyalties are not automatic' and that people won't volunteer just because 'that's what's expected'. However, Bob's comment implies that there is some pressure or expectation that leads volunteers to participate in



ambulance work, which is generally a hidden/suppressed element of the Moral Volunteer identity as discussed in the earlier section. In this context talk of the Self-interested Volunteer appears to inadvertently cast light on some shadowed aspects of the Moral Volunteer identity, which Bob tries to repair. He does this awkwardly and consequently there is some lack of clarity about the meaning of the sentence containing the clause 'clearly they're not in a one way and that's coming though very strongly', though it is likely to refer to reciprocity. Bob's final comments also unwittingly shed light on problems under the Moral Volunteer identity. Bob's comments that Self-interested Volunteers will want 'significant recognition and support', risk mitigation and that the organisation 'actually recognise the contribution they're making' suggest that current talk of recognition and support from the organisation for volunteers may be more rhetorical than real, or that current efforts lack substance. Overall, the Self-interested Volunteer identity does not blend easily with dominant Moral Volunteer identity but instead challenges the status quo by opening up new discourses.

In summary, the Self-interested Volunteer identity draws on discourses of generational change and an individualistic modern society. The Self-interested Volunteer is problematised by managers and volunteers and seen as a future challenge to services. This challenge is represented as driving future not current change, though a few volunteers used it to argue for current changes. The Self-interested Volunteer is represented as having strong agency in offering and withdrawing services to the organisation. The volunteer will use this agency to make 'rational' decisions about donating time to an organisation and will require reciprocal benefits. The Self-interested Volunteer is positioned outside the organisation within a broader social, family setting that reflects volunteers more individual needs and interests instead of those of the community. This identity is used to reflect many aspects of our changing world and the changes to individual's interests. While not a strong identity in ambulance identity work it is likely to be incorporated into and adapted to ambulance services more fully in the future as the external ambulance service environment continues to change.

## Conclusion

The four volunteer identities delineated in this chapter generate different effects in ambulance identity work depending on who uses them and the interests they reflect. Ambulance volunteers gain resources and reputé in varying degrees from the different volunteer identities, but only position themselves within either the Moral or Professional Volunteer identities, or sometimes a blend of both. Volunteers use these two identities because they reflect both personal and collective interests of ambulance volunteers including status rewards. The Moral Volunteer identity reflects the altruistic prosocial interests of volunteers and brings them high status rewards by being positioned as good citizens. The Professional Volunteer identity reflects the personal and collective health care interests of ambulance volunteers and brings the status rewards that attach to a professional identity. Societal changes are reflected in two new volunteer ambulance officer identities as volunteers and managers adjust to changing interest priorities. It is by uncovering how ambulance volunteer identities can both reflect and constrain interests that this chapter contributes to understanding volunteer agency at the interface with ambulance services.

Key features of the identities were relevant in understanding volunteers’ agency in meeting their interests. These are summarised in Table 5 as key characteristics, positioning of the volunteer through the identity, the groups that used the identity and the strength of the identity within ambulance services.

**Table 5: Summary of Ambulance Volunteer Identities**

Identity	Identity Key Characteristics	Positioning	Groups Used By	Strength of Identity
Moral Volunteer	Special Rural Community ‘Doers’ No financial rewards	Community	Volunteer Managers Community Politicians	Dominant
Professional Volunteer	Competency Need for Resource Support Service Standards	Community and Service	Volunteers Managers - (competency only)	Weak
Staff Volunteer	Need Equitable Organisational Support Organisational members	Service	‘New managers’	Increasing
Self-interested Volunteer	Influences of Modernity and Changing Demographics	Society	Managers Volunteers	Increasing

	Broad Family and Social Context			
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Not all identities were used by all members of the ambulance services, but the Moral Volunteer was the most dominant identity at the time of this study and was used by most service members. There was a temporal dimension to the ambulance volunteer identity work as two identities (the Professional and Moral Volunteer) were longer standing, and two (Staff and Self-interested Volunteer) were more recent. The two newer identities constitute elements of a morphogenesis of ambulance volunteer identity that is occurring to meet changing service environments and discourses. The prevalence of different representations of ambulance identities depending on the placing of the ambulance service on the continuum of ‘Traditionals’ to ‘Moderns’, also suggest that changing managerial discourses are directly related to the morphogenesis of ambulance identity.

While the dominant Moral Volunteer identity represents the primary agency of volunteers in committing to social connectivity and achieving the high moral status of good citizens, it also brings problems. The altruistic focus of the identity assumes and therefore naturalises communities of disadvantage, and bounds volunteers with the characteristic of non-financial rewards. These features allow volunteers to be misrecognised as agents who are responsible for rural ambulance services. The implications for volunteers of the Moral Volunteer identity and the communities they serve have been alluded to. But the next chapter looks more closely at how culture and structure interplay with agency at the ambulance interface: how culture creates structure, and how structure creates culture, to generate change or maintain the status quo.

Two identities were used to attempt to counter the resource barriers of the Moral Volunteer identity. Volunteers argued for resources by drawing on the Professional Volunteer identity, but this identity work came from a position of weakness. The Staff Volunteer identity was used by ‘new managers’ to argue for more resources for the volunteers and/or rural service areas they managed. ‘New managers’ were more successful in achieving changes within services, but were overshadowed by ‘traditional managers’ who worked to keep the status quo. The

negotiations and conflicts over interests involved in change are based on a cultural and structural interplay with collective agency. The following chapter will look more closely at why ambulance volunteers lack collective agency and how this lack of agency creates inequity by limiting volunteers' ability to negotiate economic interests.

## Chapter Six: Culturally and Structurally Embedded Inequities

*Even just determining a name badge for a group: some wanted “ambulance officer”, some wanted “volunteer”, and you know it was all the emotions and different motivations all came to a head but you just continually work through that.* New Manager interviewee Sally.

The purpose of this chapter is to understand how identity is used to negotiate interests at the interface between ambulance volunteers and ambulance services, and how this agency interplays with culture and structure. By presenting findings from the analysis of identity work it will be argued that ambulance volunteers lack collective agency. This lack of agency creates inequity by limiting volunteers’ ability to negotiate economic interests. Volunteer economic weakness has become culturally and structurally embedded in ambulance services, leaving the volunteers and the populations they serve in a marginalized position when it comes to ambulance service support and delivery.

As the opening quote highlights, identities offer rewards, and therefore they become the site of negotiation, contestation and even open conflict. While in the previous chapter I outlined the key ambulance volunteer identities and some of the cultural generative effects they create, in this chapter I focus on how these effects support structural elements of ambulance services. Pivotal to the claim of lack of volunteer collective agency, is a key finding of this study that the Moral Volunteer identity seriously undermines volunteers’ ability to access economic resources within the ambulance services. Lack of collective agency has created a situation of inequity and volunteer efforts to argue for more resources using the Professional Volunteer identity have been largely ineffectual. Binary oppositions linked to the Moral and Professional Volunteer identity generate most of this economic disempowerment.

These findings increase understanding of the mechanisms that facilitate volunteer inequity and how volunteers work ineffectually to challenge this. The Staff Volunteer identity offers the promise of increased resources for volunteers, and

the final section of this chapter shows how benefits for volunteers can occur in areas where their interests overlap with managers' interests. The chapter concludes by drawing together the findings on how interests are negotiated at the interface with ambulance. The lack of a collective volunteer voice is an underlying problem for ambulance service volunteers, the perspective elaborated herein suggests a solution worthy of further exploration.

## **The economic consequences of the Moral Volunteer identity**

The inability of volunteers to negotiate economic resources is a central reason for the majority of volunteer troubles identified in ambulance services. The inculcation of the Moral Volunteer identity into both cultural and structural elements of ambulance services has created an economic powerlessness for volunteers that becomes self-reinforcing.

The dominant Moral Volunteer identity benefits government and ambulance services financially and disadvantages volunteers in several ways: through free labour, through money contributed by volunteers to the service, and through under-resourcing. The linking of the Moral Volunteer to moral notions of non-payment was a finding of the previous chapter, an unsurprising and commonly accepted characteristic of volunteers. However, the Moral Volunteer has further effects than the economic contribution of free labour for ambulance services as volunteers' moral identity assists services to minimise other service costs. This section will discuss how this occurs both by a culture that exploits volunteer's altruism, and by the structural embedding of the Moral Volunteer identity into ambulance systems.

### **Culture into structure - altruism and frugality**

Across Traditional to nearly Modern services the altruistic characteristics of the Moral Volunteer identity provided a strong cultural mechanism to save costs. Because of the strong links between being moral and unpaid in the Moral Volunteer identity, the boundaries between being paid for labour, being reimbursed for costs, and receiving incentives are blurred. As discussed in

Chapter Two, there is no consensus on where reimbursement becomes payment and evidence shows that most services do not reimburse volunteer expenses (See for example Brudney 1999: 254). Within ambulance services reimbursement, but not payment or incentives are the norm.

Ambulance services however, reduced costs further by using volunteers not only through free labour (which is not considered to require further discussion here), but also by minimising re-imbursement claims and other organisational costs associated with training, equipment and management. A culture of frugality and altruism had developed around the volunteer workforce which was used by managers to minimise the true cost of the rural service with volunteers effectively subsidising the rural ambulance services.

The following excerpt from a volunteer newsletter (unspecified to protect identity of the author) provides a good example of the use of the cultural understanding of the altruistic Moral Volunteer to minimise costs. Reimbursement has become a key topic of interest within broader volunteer discourses (Cordingley 2000; Ellis 1997) which has led to an increased discussion within ambulance services about reimbursement topics. The SUBC report (Fahey, and Walker 2002) highlighted inequitable reimbursement policies between paid and volunteer ambulance staff and highly variable reimbursement procedures between services. Here an executive manager of a nearly Modern organisation writes about re-imbursements in a volunteer newsletter:

*Executive manager newsletter article:* Following discussions on the issue of out of pocket expenses at the [ ] meeting, I write to clarify the situation.

Provision is made in the regional budgets to provide for some reimbursement of out-of pocket expenses to Volunteer Ambulance Officers for “authorised” expenses. There is a need to give information on what is reasonable by way of claims (i.e. what is authorised) as well as advising volunteers how to claim.

Whilst every volunteer should be aware of the claims process and should not feel in any way restrained from claiming it is understood that many of you don’t wish to make claims and this is greatly appreciated – given budget issues. I think it is fair to say that if all of you claimed for everything that you spend in fulfilling the job of an ambulance volunteer the Service would be strained in its capacity to pay. However there is a clear entitlement and below I spell out the processes to follow.

...What should be claimed for?

This is not an easy question to answer. Opinions among volunteers vary from claiming nothing at all through to claiming at a level that our budget could not

sustain – What follows is our interpretation of what the majority of volunteers consider is reasonable, based on discussions at the [ ] meeting.

Phone Calls. Whilst generally the odd phone call is not claimed it is reasonable that persons who make a large number of calls such as co-ordinator positions should claim fully and regularly. Persons in these positions should not feel guilty about the high number of phone calls as they are doing a necessary and important task for the service that necessitates this level of calls.

Travel – There are a number of categories that have been identified for travel and I will try and summarise the thoughts of those consulted with regard to this. Again you should not feel restrained by these guidelines and the feelings of others and should claim if you feel justified. [only one travel category is reproduced here]

Day to day volunteer duty. Most felt that they would not claim for day to day travel such as picking up a pager, and normal travel to the station for duty. If the travel was often and extensive it was felt reasonable to claim. It is realised that in many areas volunteers use their own cars to respond to an agreed location to meet the paramedic for a case. It was accepted that a claim may be appropriate in these cases if travel was often and extensive. In this regard it was considered unreasonable for volunteers to live a long way out of town and expect to be paid travel for cases. In such cases it was considered that the volunteer should stay at the station during their duty period/ on-call period.

In this excerpt the manager claims to be clarifying the reimbursement situation and uses a reassuring and supportive tone, but then proceeds to cloud the situation. The manager obviously has a high level of access and control and while the general voice is one of organisational authority, little reference is made to the organisational authority of policies and procedures (apart from some ‘how to claim’ sections of the article which were omitted for brevity), and the tone is not officious but instead friendly and chatty. The text piece very quickly states that there is allocation in the budget for out-of pocket expenses, but the reassurance is weakened by the word ‘some’, implying a limited allocation, and only for “authorised” expenses. Placing the word authorised in inverted commas works to weaken the full meaning of the word authorised and suggests a certain subjectivity. And in this manner authorised expenses are given less official status. Instead the authority for the reimbursement ‘situation’ (note the wording is not policy) is claimed to be the general consensus of volunteers.

A pattern in the text piece is that every time volunteers are reassured in the excerpt they are also appealed to for restraint in claiming reimbursements. So the sentence with the very clear message that volunteers “should not feel in any way restrained in claiming” is followed by the clause stating that many volunteers don’t want to claim and that this is ‘appreciated – given budget issues.’ This



sentence draws on the moral discourses and rewards volunteers with moral recognition for altruism in not claiming for expenses. The last clause also reinforces the idea of the limited nature of the allocation for reimbursements by implication and without providing any clear information. This is further clarified by the manager's admission that if all potential reimbursements were claimed 'the Service would be strained'. In essence while volunteers are being reassured about their right to reimbursement, they are simultaneously asked to refrain from making reimbursement claims because of the limited resources available.

While it could be expected that policies exist in relation to the expenses that are eligible to be claimed, the authority for appropriate claims is placed with a general volunteer consensus in the excerpt. So while it is acknowledged that opinions vary among volunteers, the author claims to be presenting 'our' (the agency here is slightly unclear, but likely to be management) interpretation of volunteer consensus. Here the highest level of management assumes the role of speaking for volunteers.

Further instances of reassurance followed by calls for restraint occur through the rest of the excerpt, but the section on day to day travel raises questions about how reasonable some of the claims about 'appropriate' expenses are. An example is given where sometimes volunteers meet paramedics at the location of the case. Reimbursement in this case is acknowledged as acceptable but given weak force by qualifying this with 'may be appropriate' 'if travel was often and extensive'. Acceptance was not though extended to situations where the volunteer lived 'out of town'. In such cases it is clearly stated that it would be unreasonable that volunteers should expect the service to reimburse them for travel in their own car to attend a case. Instead it is recommended that out of town volunteers spend the shift waiting at the station for possible call-outs. The idea that requiring volunteers to spend eight or so hours at the station (often a glamorous name for a garage with a small office attached) waiting for calls (in some areas these are infrequent) is preferable to the service paying for the cost of petrol to a case, is presented as entirely reasonable. When it is remembered that in some rural areas volunteers are almost permanently on roster and that waiting at the station would become a major imposition, the reasonableness of the suggestion can be further

challenged. It is worth noting that the manager exhibits low affinity with this proposition by writing in a passive voice with implied agency given to other volunteers. In this way the manager does not have to take responsibility for the reasonableness or otherwise of the text.

Overall, in this text piece the whole issue of reimbursements is placed in a framework of value judgements, altruism and limited budgets with a lot of room for interpretation. In a climate of frugality it is unlikely that this article gave many volunteers confidence in claiming for 'authorised' expenses, particularly when another omitted section of the article specified that claims could be refused if considered unreasonable. The volunteer in essence is asked to be altruistic not only with their time but also their money to support a rural ambulance service. The manager speaks for volunteers, claiming a consensus, without justifying how knowledge of the volunteer consensus was obtained, and without reference to reimbursement policies and procedures.

The above excerpt highlights how the strength of the Moral Volunteer identity can become established into ambulance culture. While the economic altruism of ambulance volunteers works to the advantage of the ambulance services in saving costs, volunteers also willingly subject themselves to notions of frugality and altruism. This comment from a long-standing volunteer indicates the importance of altruism to the Moral Volunteer:

*Volunteer manager Carmen:* we don't even [...] we don't claim a lot of stuff like ...[we're] entitled to so much a year it's about \$1,200 or something like that...but we never have taken that. We just don't. But there's a lot of other stations where they're whingeing that they're not getting enough, but I guess we're not a terribly busy area, like - more remote, and mostly small towns.

Carmen positions herself as a moral, rural volunteer in this excerpt and her abrupt "We just don't" suggest strong feelings at the thought of accepting payment. Carmen also reinforces her disinterest in the financial entitlement by being unclear about exactly how much she is entitled to. Carmen's reference to others 'whingeing' reinforces the moral superiority of the 'no money' stance and is likely to be a reference to the Professional and/or Self-interested Volunteers.

Carmen positions her views as coming from a collective voice with the use of ‘we’, suggesting this is a consensual view held by a larger group.

Ambulance services had strong norms of frugality and altruism linked to the Moral Volunteer identity work and which worked to save the services money. As the previous chapter showed, the Moral Volunteers argue against volunteers who desire reimbursement as other to themselves and argue that ‘we’re here for the community not for other reasons’. This evidence of some volunteers supporting the culture of frugality is because altruism is at the heart of the personal identity benefits gained through Moral Volunteer identity. Accessing the status and benefits of altruism requires that an individual undertake an activity without gain, and yet there are great difficulties in differentiating between concepts of gain, payment, reimbursement and incentives. Ultimately the culture of frugality and altruism works against a key volunteer interest (the ability to deliver an ambulance service to local communities) because it becomes structurally embedded and therefore affects rural services.

### **Structurally embedded under-resourcing**

Under-resourcing of volunteers has become structurally embedded into ambulance services through the use of the Moral Volunteer identity. The culture of altruism and frugality has become structural, and this real structure in turn generates effects that support the maintenance of the Moral Volunteer identity, and affects the rural volunteer serviced populations.

The key structural effects of the Moral Volunteer identity were based on under-resourcing of volunteers. Poor human resource management and ‘last in-line’ budget allocations created a low standard of support for volunteers. Management systems placed volunteers outside budget planning, and normal policies and procedures, which meant that managers could avoid the responsibilities that attach to other members of the service workforce, and could ignore or ‘not see’ the costs of volunteers within the services. The Moral Volunteer identity therefore facilitates under-resourcing of volunteers which becomes structurally and systemically embedded. These structural elements then feedback into the

maintenance of the Moral Volunteer identity as altruism, frugality and making-do become inculcated into the Moral Volunteer ethos.

A key feature of the structural embedding of Moral Volunteer under-resourcing were inadequate Human Resource (HR) processes. Inadequate processes have also been found within other organisations that use volunteers (See for example Brudney 1999: 254; Reinholdt, and Smith 1998: 36). The following excerpts highlight how poor this information management can be:

*Manager Reg:* A small example is what we call a CPI form, a Confidential Personal Information form, and so if there's any changes to a volunteers' status, so for example if they resign, then the team leader would fill out those forms, send it in, and then the records would supposedly be updated. Then a month later they would send out a human resource report for the team which would have all the team members names on it, but what was happening was the people that had resigned kept reoccurring and that would happen over a period of years.

*And*

*New Manager Anna:* basically what we've done over the past twelve months has created over eight hundred HR files. So you can imagine the state that things were in. It was an absolute mess... 'cause there was a lot of stuff that was outstanding and people were still ringing us from the previous year so it was shocking really.

As the excerpts above suggest, a major result of under-resourced HR processes was that most ambulance services had inadequate information about their volunteer workforce, and inadequate information created a level of invisibility of volunteer concerns. Instead of well kept databases with up to date volunteer workforce information, many services used a rough calculation of local team numbers based on out of date information.

The 'rough estimation' maintained a structural resource inequity and hid individual volunteer problems. Within most services volunteers were numerically visible at an aggregated level that allowed rural stations to be thought of as one entity. For example rural towns are discussed in terms of the number of team members, the caseloads for the station, and the response times and severity of cases attended. This form of numerical visibility however was not up to date, nor specific enough to provide reliable information about the volunteers who provided the ambulance services. At an aggregated level it was not clear whether several

people undertook nearly all the on-call work and had significantly higher case-loads or whether the loads were shared equally.

This lack of information creates difficulties in planning, budgeting and understanding the volunteer workforce. The following excerpt highlights the poor level of workforce information in a nearly Modern:

*Andrew Volunteer Manager:* It's always going to be very hard. One of the things that I've been quite vocal about, is that the statistical database that we've got on volunteers is very very poor. We sort of know who they are, name, rank and serial number stuff. And in fact we really found that we didn't know that all that well because last year we introduced recognition of 25 years service by awarding a gold watch, and we had a dinner to celebrate all that, and to actually identify all the people who were eligible for that was a major undertaking and we really had to sort of go out to, cap in hand, to teams and say, 'look, how many people do you think you've got on your book?'

CS: oh dear.

Andrew: And our central recording system didn't accurately do it. Now when you're dealing with say thirteen hundred volunteers who are operational and another three to four hundred who are administrative volunteers and you really don't know who they are or where they are in your state, and I'm sorry but I think we haven't got that part right. As well as that, last year I think we recruited 275 people. Now that's not a bad number. If you've got a workforce of about 1300, that's not a bad percentage. But we lost 194, now I think that's still too high. But what I don't know is, what part of that 1300 was the 194. In other words, if we recruited 275, how many of the new recruits did we lose, how many were people who were in teams that had been there for 20 and 30 years and said, 'ok we've got two or three young people, I'm going to retire now.' Which is a fair and just thing to do, but we don't identify them, our statistics are not enabling us to make good management decisions based on what's happening. And with the introduction of the new training initiatives and also a new regional service delivery model, I've been screaming for statistics to be upgraded because we need a benchmark.

This interview excerpt demonstrates some of the problems with poor data collections and some of the typical aggregations that have made volunteers visible or invisible within ambulance services. The gross numbers of volunteers are rounded to the nearest hundred "...thirteen hundred volunteers who are operational"<sup>32</sup>, but in some case the figures are so poor that even this is not possible "and another three to four hundred who are administrative volunteers". In the case of the administrative volunteers the numbers are 'give or take' a hundred. The excerpt also gives a good example of why this statistical invisibility may be a

<sup>32</sup> Numbers were changed to maintain confidentiality

problem for volunteers. When the organisation attempts to recognise those who have given twenty-five years service, they are unable to do this without actually asking local teams “how many people do you think you’ve got on your books”. Familiar themes emerge here from the discussion of Moral Volunteer identity – that of local volunteers having responsibility for service provision, ‘you’ve got on your books’ draws on the discourse of the community volunteer, but the allegory ‘cap in hand’ acknowledges that it is less than ideal that an organisation cannot identify those people who have contributed 25 years of free labour in providing an ambulance service to rural areas.

Poor statistical information prevents services from making ‘good management decisions’. Andrew uses the example of the simplistic calculations that limit understanding of volunteer retention, such as that demonstrated in the next text piece:

*Manager George:* I don’t think it’s changed at all. I think we’re recruiting as many as we’re losing so I think we’re treading water just like we were when we did the SUBC and now I think the total gain in the last 21 months has been 80 so it showed me that we haven’t really achieved a lot.

George represents the volunteer numbers more simplistically, and uses them to suggest that despite a lot of work in areas of retention “we haven’t really achieved a lot.” This represents volunteers as a pure number equation, an equation that can be used to show that despite a lot of effort ‘we’re treading water’. In this way the more complex factors of the situation, some of which Andrew identified, can be suppressed or ignored and volunteer interests are lost in a simple number equation. Inadequate information can be seen to work against the interests of volunteers in a manner that seems to be apposite to Foucault’s (1991a) ideas of surveillance. However, it is the framing of the information under broad numerical aggregations that is the key, because it still allows control of volunteers as teams, but provides limited understanding about the compositions of the teams and how volunteers are affected by changes.

Some of the key troubles experienced within ambulance services can easily be linked to the cultural and structural effects of the Moral Volunteer’s weak economic bargaining position. Troubles such as: poor training delivery,

inadequate uniform supply, old or damaged equipment, limited or inequitable reimbursement policies, and poor communication and management processes resulted from the failure to 'see' volunteers as a service workforce and to 'hear' their service need.

These problems appear to have built up following a pattern of inadequate resources over a long period. Cultural norms around the Moral Volunteer identity, which satisfied the personal identity interests of Moral Volunteers, became embedded into ambulance service structures. The embedding of the Moral Volunteer identity met managers' interests of providing ambulance services within limited budgets and was therefore maintained, which means they worked to maintain this status quo. While the cultural and structural embedding of the Moral Volunteer appears to have led to volunteer troubles, it was largely possible because managers had the corporate agency to control volunteer representations.

### **Volunteers locked into a community field of visibility**

The cultural and structural embedding of the Moral Volunteer economic weakness in ambulance services is possible partly because of the discursive positioning of the volunteer within the community. This community positioning creates a 'limited field view' that makes Moral Volunteers visible only within a community framework. This invisibility was found in the analysis of ambulance service annual reports where volunteers are frequently invisible in the ambulance context. Annual reports can be considered a formal genre of text and one which represents the management voice of organisations. Reports work as filtering devices to move information into a form of impersonal logic that can be read outside the local setting (Fairclough 2003). However even when accounting for the function of reports, the findings around the fields of volunteer visibility showed a community/ambulance dualism.

Within the annual reports volunteers are represented in a positive framework, but as an "object of information, never a subject in communication..."(Foucault 1991a: 200) They are reported on by management and placed outside the context of ambulance service into a social field. They are divided off as separate and 'other', low in the organisational business hierarchy, but highly placed in terms of

the social or promotional aspects of the organisation. Volunteers were largely invisible in the ambulance context in all reports, though they were more visible within non-government organisation annual reports than government organisation annual reports. A simple count of the number of times the word 'volunteer' appeared within the annual reports over the period 2003/2004 showed that the two government bodies used the word only six and nine times, while one nongovernment ambulance organisation used the word volunteer seventy-seven times. Increased frequency of the word volunteer however, did not result in an increased visibility for volunteers within the ambulance context, but instead reflected an increased visibility within broader community fields. So for example, in social sections of the report describing ambulance social and community events, volunteers were mentioned. Or in report sections focused on community projects, volunteers were prominent, but in sections related to ambulance service delivery the word volunteer was notably absent. Overall, there was a lack of ambulance related visibility despite the large percentage of the ambulance workforce that is made up by volunteers.

The ambulance volunteers were represented through a 'limited field view', that is to say they were primarily made visible within a community or social sphere. The extent of volunteer involvement in ambulance services was not clearly presented in operational sections of the reports, but instead became hidden within the generic term 'staff'. For example, only as an incidental in a 'social' section of the report profiling an individual ambulance officer (paid but this is not specified), do we learn that one organisation "calls on the services of over 600 salaried and nearly 2,000 volunteer ambulance staff". This is the only direct linking of the word volunteer with ambulance services within a sixty-six page report and the only clear indication of how much of the ambulance service is provided by volunteers. Where volunteers are linked to ambulance in all reports, it is generally as part of a list of staff where volunteers are always placed last. Such lists point to a normalized understanding of the organisational hierarchies where volunteers are subordinate to paid and casual staff.

Where volunteers are visible they are framed within the social sections of the report or used to highlight achievements of the ambulance service over the past



year instead of being framed within service delivery. The following two short excerpts demonstrate the different framing that is used to refer to volunteers within either a community context or within an ambulance context.

*ORG 2 Annual Report 2004:* In the past year we have seen a significant and very pleasing upsurge in our community-based services, in terms of demand and the number of volunteers attracted to the organisation to help run these programmes...This is a fantastic endorsement of our community programmes, and also of our active recruitment practices in support of the programmes. It means the ORG is expanding, drawing in people from many diverse backgrounds and enriching the skill and experience base of the organisation. ....

There has been an ongoing increase in workload for our ambulance staff, based mainly around a 5.9% upturn in medical call-outs. We are currently addressing ambulance staffing hot spots, and work on improving response times is underway.

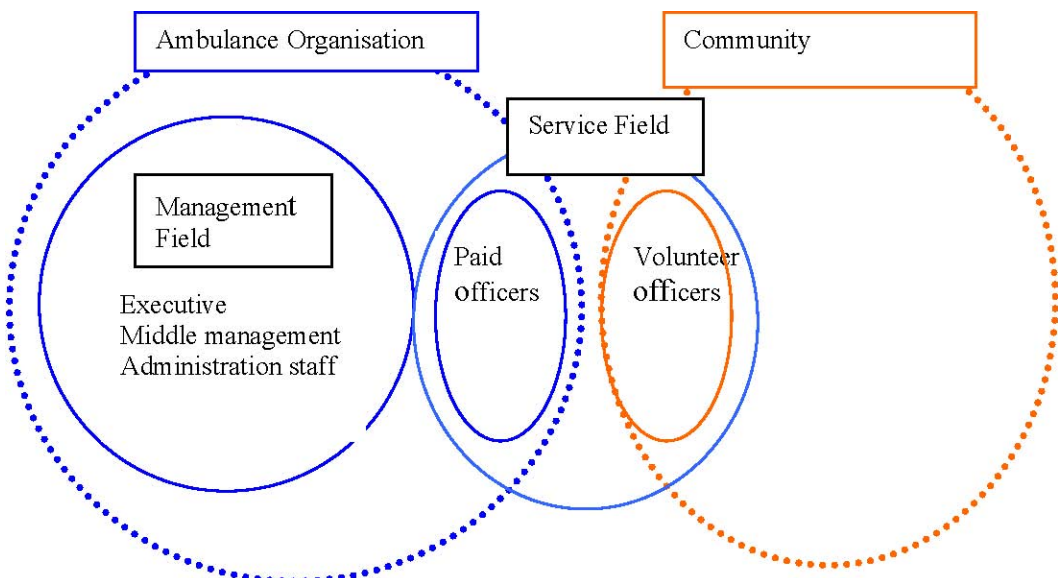
These two pieces are from the same page of the report, and yet fit different genres. One fits a 'promotional genre' (Fairclough 2003: 33) which works to promote the organisation and the programs that are delivered. The second paragraph though fits a business genre, with a business like tone. The volunteers in the second paragraph are not separated from paid staff, and thereby become invisible.

The different approach in the visibility of volunteers depending on the frame of reference to either 'community' or 'ambulance' suggests there may be some difficulty in linking a professional discourse with a caring community discourse. Classifications are strongly influenced by binary effects causing the volunteer subject as a caring community member to be 'other' to a professional ambulance service, this in turn means that volunteers become difficult to see or invisible within fields that are 'other' to community, such as the economic or professional fields.

The power of the limited field view arises from the power of binary categorisation to affect the way people think and talk. As discussed in Chapter One 'binary oppositions' are central to the ways people classify (Hall 2001b: 329) with a tendency towards dualistic types of subjects such as volunteer or non-volunteer. As Hall noted (2001b: 329) most identity binary classifications carry an implied good/bad, or powerful/weak divide. When this dualism is translated into fields (as in broad spheres of activity) community as a social field becomes other to ambulance organisations which are an economic field. A similar dualism has been

found by other when looking at media representation of volunteers. Smith (1997: 275) found that volunteerism is normalized within a community service focus, but not in a professional health service context, which creates a “flat earth” view of volunteerism. The Moral Volunteer identity works to create not a ‘flat earth view’ but a ‘community bound volunteer’.

Dualism works because when volunteers are promoted as being within a social community field, they are excluded from being visible within an economic ambulance field. By foregrounding one characteristic others are left out. What is ‘left out’ for ambulance volunteers is their visibility as service providers, which has resourcing implications for volunteers themselves and the populations they serve. By being aligned with high moral standards and the motivations of helping, the volunteer is ‘other’ to concerns of the economic sphere. In effect they are ‘misrecognized’ as community agents, not organisational agents. This is diagrammatically represented in Figure 2.



**Figure 1: Limiting representations of Moral Volunteers to a community field**

Volunteers therefore become positioned outside economic discourses and are placed in a weak situation when arguing for a share of economic resources. Within an organisational context this is particularly a problem as volunteers cannot readily draw on normal economic discourses about payment for services. As a result, debates about payment of time and reimbursement of expenses become based more on emotional and moral arguments than equity or economic

matters. Equally, because arguing over money reduces the status of the Moral Volunteer's altruism, there are many volunteers who help to maintain this situation. This positioning affects not only the individual volunteer who may be 'out-of-pocket' but also areas serviced by volunteers. Because the volunteer is so lauded for altruism, financial payment becomes almost amoral as altruism is placed in a dichotomous relationship with money. This allows those in a more dominant position to limit the volunteers' access to a share of resources as they use the cultural non-payment characteristics of Moral Volunteers to 'appeal' to volunteers moral virtues of frugality and charity.

The gains for managers from a volunteer economic weakness are likely to be a greater share of resources to serve managers' interests in allocating limited service funding. Managers' interests would likely include matters that were more visible, more urgent, or more aligned with managers' own personal interests. But why would volunteers subject themselves to the Moral Volunteer identity? As the previous chapter identified the Moral Volunteer identity rewards volunteers with an altruistic status and also reflects the emotional and prosocial benefits gained from connecting with others through ambulance volunteering. Because Moral Volunteers accept altruism and frugality along with agency for local service delivery this inequitable resource situation was not necessarily challenged even when the personal benefits outweighed the costs.

As this section has argued, an economic powerlessness for volunteers and the populations they serve was culturally and structurally embedded in ambulance services, and was inculcated in the Moral Volunteer identity. These elements of economic weakness were actively used by managers and facilitated by volunteers through Moral Volunteer identity work. However, with increasing volunteer troubles there were efforts by volunteers to bypass the limiting effects of the Moral Volunteer identity through use of the Professional Volunteer identity.

## **Failure of the Professional Volunteer identity to gain resources**

The Professional Volunteer identity has been an ineffective strategy for gaining extra volunteer resources because volunteers lacked a forum for expressing a collective voice. The previous chapter found that volunteers are weakly positioned when they argue for resources and improved service standards through the Professional Volunteer identity. This section outlines the key barriers to volunteers being able to effect change: an embedded rural/urban dualism, a conflict of interests with paid staff, and blocked communication channels. All of these factors worked to prevent a collective volunteer voice at the interface with ambulance services.

The SUBC survey responses had many examples of volunteers arguing for a share of financial resources using the Professional Volunteer identity. Because the Moral Volunteer identity provides barriers to volunteers wanting to engage in economic dialogue, volunteers accessed a different identity to argue for resources. Volunteers used the Professional Volunteer identity because by foregrounding the service delivery aspects of their role they can argue for resources. However, the Professional Volunteer identity was not an effective strategy for volunteers in gaining resources and three key reasons will be presented here.

### **Rural/urban dualism**

The Professional Volunteer identity failed to gain volunteers resources partly because it maintained volunteers as 'other' to ambulance organisations through a rural/urban dualism. As the previous chapter highlighted, volunteers positioned themselves within the Professional Volunteer identity as responsible for services within the community. However they foregrounded the required support for delivering this service, such as suitable training, equipment and management support as a form of argumentation. But, the Professional Volunteer identity weakness in gaining resources is again based on binary oppositions. A rural/urban dualism was evident in ambulance identity work which positioned the Professional Volunteer within the rural community and as agents responsible for

local services in a similar manner to the Moral Volunteer ambulance/community dualism.

However, volunteers tried to negate the rural/urban divide within the Professional Volunteer identity by claiming that the difference between rural and urban services was inequitable. Through the Professional Volunteer identity volunteers argued that there was inequity between rural/urban services, between volunteer/paid ambulance officers and even between ambulance volunteers and other volunteer services.

Representing the services as biased against volunteer ambulance officers was a strong means of contestation from volunteers. Three examples of this are provided below:

*Anonymous volunteer (245):* As a volunteer station we often do not get up to date/latest info until well after 'paid' stations. Sometimes we feel that we are not as 'important' as 'paid staff' – on the outer.

*And*

*Anonymous volunteer (631):* Providing uniforms that match permanent staff, including jackets, we vols [volunteers] get cold at night as well!

*And*

*Anonymous volunteer (534):* My home town is in rural area where I do some ambulance volunteer work in the holidays. Rural areas generally don't have Paramedics so are particularly disadvantaged compared to city volunteers. Rural area volunteers should therefore receive more planned training sessions with paramedics. Monthly phone calls to volunteers to see if there are any problems would be useful.

Direct comparison between volunteer and paid (as in staffed fully by paid ambulance officers) stations, and rural and urban, frame the theme of volunteers feeling less important and even ignored. All excerpts imply a situation of inequality.

The rural/urban dualism means that managers and volunteers generally<sup>33</sup> continue to represent the volunteers as being responsible for services under a Professional Volunteer identity. Rural is 'other' to urban and therefore difference is expected. By representing the organisation as responsible for setting standards, but delivery of services and standards as the responsibility of the volunteer, the visibility of the role of the ambulance service in delivering a rural service is hidden. Problems such as a lack of volunteer staff to cover rosters, inadequate training, or poor standards amongst volunteer officers can be ignored or blamed on the volunteers themselves. They can be contained outside the field of ambulance service and therefore the economic costs of delivering such a service can be contained.

The normalising of resourcing differences between urban and rural services was most evident in 'Traditionals' and is demonstrated in the following excerpt. The text is taken from a report section on finances, where rural and metropolitan income and expenditure are stated, and a breakdown of 'rural income sources' and rural expenditure are provided.

*Org 3 Annual Report 2004:* Rural services had also developed progressively with ORG acting to facilitate local communities providing themselves with ambulance services.....

In recent decades equipping ambulances has emerged as a specialised branch of medical technology, with these high tech medical aids adding a life support role to the original transport function. All of these improvements come at a cost and some rural stations have had great difficulties in financing new ambulances. However, the cyclical replacement policy for major items of equipment, which was introduced in 1988, has been of great assistance. A further development of this policy commenced on 1 July 2005, with approximately 30 ambulances being deselected from the metropolitan fleet every year and donated without charge to country sub centres.

Rural services in this service are so 'other' to the metropolitan service that they receive their older ambulances as 'donations'. The author clearly places rural communities in a position for 'providing themselves with ambulance services', not the ambulance organisation. Despite the organisation receiving millions of dollars in government funding (Australian Government Productivity Commission

<sup>33</sup> There were some shifts in the discourse boundaries here and some volunteers did not accept responsibility for services under the Professional Volunteer identity.

2006), there is a clear allocation of responsibility to rural communities for providing ambulance vehicles. The donation of ambulances to rural services is presented as a generous act as “some stations have had great difficulties in financing new ambulances”. This is not the situation in urban areas as local communities are not expected to raise funds for new ambulances.

As discussed in Chapter Three, ‘Traditionals’ retain many features of early St John Ambulance services, of which community support was a strong feature. In the traditional model rural services are still initiated by local communities. Local communities raise funds to build stations and raise funds to buy ambulance vehicles before the ambulance service will commit to providing umbrella organisational status. This funding approach was the basis of most ambulance service development in Australia and New Zealand and can help explain the cultural emergence of a rural/urban funding difference.

The greater rural/urban divide in ‘Traditionals’ may also explain why they were more likely to make ambulance volunteers visible within professional and economic fields. In annual reports volunteers are presented as professionals with a frame of reference that included linking with words such as accredited, training, services. Clear figures that relate to service delivery from metropolitan to country and volunteer and paid staff are provided, which is quite different to ‘Nearly Moderns’ and ‘Moderns’.

While this heightened professional visibility in some ‘Traditionals’ appeared to contradict the findings from other services where volunteers were not visible in the ambulance context, further analysis suggested that in such cases professional visibility worked to hide a situation of even greater inequality than with ‘Moderns’. The way volunteers are made visible as professionals works to mask the differences in professional standard between rural ambulance services and metropolitan services, and similarly the economic visibility masks an inequitable and normative resourcing situation for rural services that is actually greater within ‘Traditionals’ than ‘Nearly Moderns’. The rural/urban dualism has embedded a structural inequality for rural populations that is ineffectually challenged by the Professional Volunteer identity. The limited use of paid staff in rural areas is

partly responsible for the maintenance of this rural/urban inequality as there is limited overlap between the urban interests and rural interests.

## **Conflicting interests with paid staff**

Volunteers place themselves in a situation of conflict with paid staff interests by positioning themselves as equal to paid staff, which creates the second barrier to volunteers successfully arguing for interests through the Professional Volunteer identity. This conflict in interests works against volunteers because paid ambulance officers have proven through previous strike action that they can mobilise Corporate Agency to meet their interests (O'Meara 2002: 99).

The Professional Volunteer identity creates a situation of conflicting interests with paid ambulance staff in both status and financial terms. Because services have a restricted number of resources then when volunteers argue for extra resources they challenge the resources available to paid staff. As the historical beginnings of ambulance services allowed the rural volunteer section to be significantly under funded, challenges that attempt to gain extra funds for this area threaten those working in sections that have previously gained a majority share of funds.

The Professional Volunteer identity also poses challenges to paid ambulance officers' status. By attempting to claim the same professional status as paid ambulance officers (and in some cases the qualifications are equal and in others much lower) then the status of paid officers is challenged (Baldock 1990: 61). Paid ambulance officers then must counter these challenges to their interests by challenging the volunteer status and by limiting their access to resources. Such behaviour was observed during this study and evidence is found in the complaints and justifications that came through volunteer identity work. The following excerpts provide examples of this:

*Anonymous volunteer (154):* Some paid staff criticise volunteers in front of other people. "Look down their noses".

*And*

*Anonymous volunteer (416):* Paid city officers need to remember that rural volunteers are not stupid.



*And*

*Anonymous volunteer (547):* We are all there to do the same job and whether we are paid or not we all have the same training. We need to get past the old ways and move on. Remember the saying treat others as you want them to treat you.

Comments such as these were found throughout the survey responses and suggested negativity towards volunteers by some paid staff. There is a limited acknowledgement of this problem in the literature (Volunteering Australia 2006) but recent moves to improve the ‘culture’ noted in several services are an acknowledgement of the existence of some conflict and division between paid and volunteer staff (Lizard Drinking Business Solutions 2003; St John New Zealand 2006). Older paid staff who had once been volunteers themselves were mentioned by several respondents as most likely to treat volunteers badly. While this group perhaps could be argued to have more empathy with volunteers they are also more likely to have the same training qualifications as volunteers (as discussed in Chapter Three), and therefore to be more challenged by volunteers claiming an equivalent status. This issue is succinctly argued by the following respondent:

*Anonymous Volunteer (623):* Paid staff members seem to believe we are stealing their overtime, etc. Even though this is only human nature there seems to be a culture of laziness/ blame and greed in smaller stations... a them vs us mentality when both groups should be there for the same thing. This obviously does not apply to all paid officers, but generally all the older staff seem to fall into this group esp non paramedic. Do we threaten them, and why? Perhaps they have been sitting on a qualification for 15-20 years with no up-skilling and are stagnant and need a good shake up. Thank you for this chance to contribute. I hope this comes to something as I passionately believe in [the organisation].

This excerpt identifies so many of the volunteer/paid staff issues and the ‘Thank you for this chance to contribute...I hope this comes to something’ suggests again that volunteers have lacked opportunities for voicing complaints and issues. In effect the Professional Volunteer identity places volunteers and paid staff in a situation of conflicting interests around status and resources, which will cause paid staff to work to counter and minimise the use of the identity. They can do this by undermining the claims to a Professional status but perhaps more importantly by blocking communication of volunteer complaints.

## Blocked communication channels

A third difficulty for the volunteers in gaining resources through the Professional Volunteer identity was problems with the systems for communicating with volunteers. Volunteers had difficulty either having issues and problems ‘heard’ or responded to, and identified that communication was a top-down process with almost no process for bottom-up feedback, even in those organisations with representative committee structures. The frustration expressed with the inability to be heard is a feature of the following excerpts:

*Anonymous volunteer (572):* To management, listen to what people are trying to tell you about what goes on in our rural area

*And*

*Anonymous volunteer (268):* Yes, letter and notes included. Thankyou so much for allowing me to voice my opinion as this is the first time I have been asked for any feedback.

The SUBC survey results contained many examples of volunteers expressing gratitude for the opportunity to ‘have a say’. The first excerpt expresses a high level of frustration for not being heard and the second excerpt expresses gratitude for the opportunity to respond to the survey. The mention of the ‘letter and notes’ points to additional written material, and it was not uncommon for respondents to fill the blank back page of the survey with comments and then attach further handwritten notes. Many respondents wanted to tell their problems, make suggestions, or share a grievance. The responses suggested major impediments for volunteers in raising issues, and inadequacies in the ambulance communication.

As discussed in Chapter Three, ambulance services rely on two key systems for communicating with volunteers: a management hierarchy system and a representative system. Neither method appeared to work well in allowing volunteer complaints and issues to be heard within services. While Baldock (1990: 132) identified a relationship between management hierarchy and decreased participatory democracy for volunteers the problems with the representative system are at first more surprising. Representative systems should work to represent the interests of volunteers in a democratically representative way. As described in chapter Three, several of the ambulance services under study

had representative structures that remained from traditional St John Ambulance Association structures. The structures involved local Branch Committees, reporting to Zone Committees, reporting to an Advisory Committee. Other services relied on normal management structures with team leaders reporting to area managers, reporting to regional managers, reporting to the executive.

However, conflicting interests help to explain how the failure of both systems may occur. Both systems performed a dual role of financial control/management and of representing volunteers' interests. Committees were in place to oversight volunteer issues and had control of local funds that were raised by ambulance services or channelled down to local levels. These funds were then under the control of the committees for disbursement back to volunteers for reimbursements, equipment and other expenses. This dual role created a conflict of interests and a segregation of the volunteer workforce which could be affected by the wealth or poverty of a local area as well as the local culture of committee members.

*Anonymous Volunteer (57):* As a Rural Officer I think we should be paid a reasonable hourly rate for when we are on a call, as some callouts can take 10-12 hours. Do away with the area committees, who have no understanding of what is required of an AO [ambulance officer]. All committees should be made up of active A/Os or Community Service members - not people who have no vision for the service or any interest in supporting active members.

*And*

*Anonymous Volunteer (531):* See that all volly officers receive the issue of adequate uniform items i.e, enough shirts, trousers, jersey's to provide an effective change when soiled in mid-roster duty. Add to issue - cold climate jacket. Area committees differ greatly in their attitudes and support of volly officers and also the financial resources they hold can vary from precarious to well-off, and officers suffer from this local influence in the way they are treated. This is not good enough- the central service structures should be accountable for all costs of training, uniforms etc.

By placing committee volunteers, who have a culture of frugality, in charge of financial disbursement, their interests became counter to those of the volunteers seeking reimbursements or new equipment. In some areas this led to the inequity in reimbursements. In some cases this was not due to 'precarious' finances with some committees maintaining large bank balances AND ignoring requests from volunteers for equipment or reimbursement. As well, the committee members

became another class of volunteer who identified more with managers, a segregation problem also noted by Baldock (1990: 59). The strength of service financial imperatives and the weakness of volunteers to argue for economic resources (note the use of the Professional Volunteer identity by both volunteers in the above excerpts) mean that the dual role of those in charge of responding to volunteer interests worked against volunteer interests.

This section has highlighted the weakness of volunteers at the interface with ambulance services when they argue for their collective economic interests. The ineffectiveness of the Professional Volunteer identity in arguing for resources could be found within a historical rural/urban divide, conflicts of interest between paid and volunteer staff and blocked communication channels which also had conflicts of interest as an underlying cause. It is in the interests of paid staff to limit the resources and professional status of volunteers, and in the interests of managers to limit volunteer resourcing. The findings support the argument that volunteers lack the agency to argue for their interests and that managers dominate volunteer identity work with negative economic consequences for volunteers. The cultural mechanisms of volunteer identity worked in synergy with ambulance structures to maintain volunteers as a cheap and hidden workforce, paid via a high moral status. However, over the life of the study, changes were occurring within ambulance services, with an increased focus on responding to volunteer needs, which provides a useful window into the mechanisms of change.

### **The Staff Volunteer identity – the potential and risks of change**

The findings have highlighted how it is managers, not volunteers who have the collective agency to effect volunteer identity change, which in turn suggests that any benefits from changes for volunteers will be dependent on an overlap in interests with managers. The morphogenesis (change) towards a Staff Volunteer identity brings potential benefits to volunteers, but because volunteers lack agency in the process benefits are a side-effect of 'new managers' interests. As managers initiate changes to meet their work interests it is only where these interests overlap with volunteers' interests that changes will benefit volunteers. The lack of a

strong volunteer collective voice means that volunteers cannot collectively effect change to meet their interests. Therefore while the Staff Volunteer identity promises volunteer benefits, it also poses the risk that changes may be superficial and will camouflage a continuing inequity for volunteers and the populations they serve.

To support the argument that the Staff Volunteer identity morphogenesis brings risks, I begin by detailing where the Staff Volunteer identity meets overlapping interests of both managers and volunteers. However, because volunteers are only responding to, not effecting change there is a risk that a cultural and structural inequity can continue to underlie changes that are only superficial. An example is provided of the change process within one service, which focused on consultation and ‘special management’ structures in a manner that continued to limit volunteer voice and volunteer access to resources. The linking of new discourses of community partnerships to the Staff Volunteer identity also poses the risk of facilitating an ongoing situation of inequity. Community participation discourses work to represent rural communities as responsible for ambulance services, thereby replicating the work of the Moral Volunteer identity in keeping rural ambulance services as other to urban ambulance services. However, these risks need not outweigh the promises if volunteers can achieve a collective agency.

### **Promising Changes – managers interests overlap with volunteers**

‘New managers’ have improved the level of resourcing of volunteers through the Staff Volunteer identity, but only in areas where volunteers’ interests overlap with managers’ interests. As volunteer troubles began to adversely affect volunteer workforce numbers, managers needed to address issues around volunteer recruitment and retention. This focus created an overlap between the interests of volunteers and the interests of managers. The SUBC survey results gave managers new information and a new framework for thinking about the volunteer workforce. These new ideas were picked up by ‘new managers’ who had the capacity to challenge the status quo and the rationale of needing to address the problem of volunteer workforce numbers. It was this combination of problem,

new ideas and a new group of agents that created a window for change within the services.

Managers began to understand volunteer troubles in a new way as discourses moved from a focus on recruiting volunteers to retaining volunteers, with the inherent need to consider how volunteers were treated within services (See for example Emergency Management Australia 2001, 2003b; Fahey, and Walker 2002). 'New managers' were pivotal in the morphogenesis because they were brought in to deal specifically with volunteer issues. They brought new discourses and were not acculturated to the embedded way of thinking about volunteers. Their roles closely aligned their interests with those of volunteers. Success in their own position was linked to improved volunteer recruitment and retention, which new thinking had linked to solving volunteer troubles.

Services responded differently to the identified volunteer problems with some delivering minimal increases in resources and others more significant changes. As the previous chapter showed, the Staff Volunteer identity allowed 'new managers' to represent volunteers as staff and they were therefore positioned as an ambulance service responsibility, as was the delivery of rural ambulance services. This change moved away from the binary classification barriers of the Moral and Professional Volunteer identities and created an identity that placed volunteers within the ambulance field and therefore allowed 'new managers' to argue for new volunteer resources, systems and policies.

'New managers' however, needed to argue for changes because the cultural and structural volunteer inequity had created a status quo that was in the interests of 'traditional managers'. Therefore changes threatened this status quo and created problems for 'traditional managers'. In order to meet the challenge of requests for more economic resources for volunteers 'traditional managers' needed to find new funding, re-allocate resources away from paid staff, or manage the change process in a manner that delivered a superficial level of change but did not fundamentally change resource allocation. And while 'new managers' had the agency to promote change they were not strongly placed within the service to dominate the change decisions thereby allowing dilution or subversion of changes. The following

excerpt shows elements of the ‘new managers’ arguments and the weaker position of the speaker:

*New manager Sophie:* ...But again, you know without a lot more resources, that is actually going to be a very slow process. I certainly want to work with my rural management team to perhaps re-allocate some resources, but the question still needs to be asked if you look at the rural workforce and the size of it and its particular demands and then look at the resources we’re given and then you compare the metro workforce and the size of that and the resources it’s given, there’s quite a disparity. So my question at that particular level will be why?

Sophie uses comparison with metropolitan services to question the resourcing for rural services<sup>34</sup>. The main theme of the argument is: compare the size of the rural workforce with metropolitan, and consider that there are ‘special demands’ from the rural workforce, then compare resources – there is a disparity.’ However, Sophie’s move to a passive voice and change in modality from I to ‘you’ suggests that this is not a challenge coming from a dominant position. Sophie stops short of saying this is an unfair situation, instead she says ‘my question...will be why? (This is a question Sophie plans to ask of the ‘traditional managers’ at the approaching meeting). The weaker position of ‘new managers’ meant that proposed changes were able to be watered down or subverted to prevent deep changes to the culture and structures of ambulance services.

The manner in which overlapping interests effect promising change can be seen in the following example where ambulance services are increasingly using paid ambulance officers to support and supervise one or several volunteer teams (herein called Paid Support Officers [PSO] for convenience).

The PSO model of volunteer support appears to increase the satisfaction of local volunteers, improve their training, remove some administrative burden from volunteers and provide extra clinical back-up (Fahey, and Walker 2001a; O'Meara et al. 2006). This model is different to the traditional idea of mixed paid/volunteer units because it makes the PSO directly responsible for the volunteer teams. This responsibility creates an overlap in paid and volunteer staff interests, unlike the

<sup>34</sup> The context is that Sophie is discussing an executive planning meeting and changes within the volunteer program.

mixed team model which creates a conflict of interests as described previously. Once it becomes the stated role of the paid staff to support the volunteer staff members, then many resourcing, recruitment, retention, training and management interests begin to overlap with volunteer interests. The following excerpt describes the changing responsibilities of the PSO role:

*Manager Greg:* The PSO, they've gone through a change in their job description. There's a change in level of responsibility from them which has been reflected in the packages that they have. I expect there may be a greater level of responsibility probably put on them for day-to-day management of the teams that they have, especially as they move to the ratio of 1 PSO to the three volunteer teams, three or four volunteer teams. I can only see that it'll be good, especially in the mix from PSO to volunteer teams – that can only be positive to have more support and more time to put into the teams because the PSOs are responsible for the crew training as well as the maintenance training.

Greg identifies how the changing role is reflected in the job descriptions and pay levels of paid staff. These structural changes create both requirements and incentives around the PSO role so that it is more likely to translate to an actual change in the working role of the paid staff. Several services have introduced variations of the PSO position to undertake this support role. However, the extent of the benefits to volunteers will depend on mechanisms that monitor PSO performance and an ongoing overlap in interests.

While overlapping interests lead managers and paid officers to support volunteer concerns, this support excludes the inevitable areas where volunteer interests either conflict with or are not of great concern to paid staff. The following excerpt suggests the invisibility of this problem:

*Volunteer Leader Gwen:* and like to be fair there's lots of paid staff that are straight behind us and are willing to help us and... but it seems to be that willingness is to a degree, that they can't take it that one step further, and I can't really give you any specifics. It's just like it becomes a bit of a stonewall for no apparent reason

Gwen attempts to discuss an elusive problem. With her claim that many career staff are supportive, but that it is only 'to a degree', she struggles to identify a specific example which may be because the situation is a subtle one. Being heard 'to a degree' was also encountered by volunteers who argued for a 'volunteer charter' within the service with the aim of embedding volunteer rights. A charter was proposed to document baseline responsibilities of the service towards



volunteers. The idea of a volunteer charter was not approved by managers as it was argued that volunteers would be covered instead by new policies that were being written.

*Volunteer Leader Fred:* So now they're doing the policies. They were in the process of actually doing the policy. Until we came up with the charter they said "Oh, we'll have to put the volunteers in these policies." So we would have been missed out.

Fred describes a flow of events that has the inclusion of volunteers within new policies occurring as a counter to the idea of a volunteer charter. Overall, Fred displays an adversarial approach to the managers' dealings with volunteers at a structural and system level.

There are changes within ambulance services that are providing extra resources for ambulance volunteers, but these are being driven by managers. In particular 'new managers' using the Staff Volunteer identity are arguing for volunteer resources in 'Nearly Moderns' to 'Moderns'. But while 'new managers' have enough agency to initiate changes, longer standing interests within services will work to maintain the status quo at a deeper level. Without a stronger volunteer voice, changes will be limited to those areas where volunteers' interests overlap with managers' interests.

### **Lack of a collective volunteer voice.**

While volunteers are gaining from the Staff Volunteer identity there is a risk that volunteers will experience misrepresentation of their concerns because they do not have the collective agency to promote collective interests. In order to be considered Corporate Agents volunteers need to be able to express their interests and pursue them strategically within ambulance services. If collectivities of Primary Agents are unable to be heard they 'cannot be *strategically* [original emphasis] involved in the modeling or re-modeling of structure or culture' (Archer 2000: 265).

Volunteer comments highlighted a long period of time where volunteers felt unheard. Cynicism towards change and managers was common amongst longer-standing volunteers who felt they had 'heard it all before' but not seen any action.

*Volunteer Leader Fred:* You've got the longstanding ones. They've been in the system, "Ho hum, seen this before. Nothing gets done. So no, don't come with that,"

*And*

*Anonymous Volunteer (563):* Is it worth making them [suggestions] unless you change the management structure at the top in our area. We're never going to be listened to and changes for the better will never be made.

Sentiments such as those expressed in the above excerpts suggests both powerlessness on the part of volunteers leading to 'passive resistance' (Scott 1985), and a long standing system of superficial or rhetorical change. Communication systems within ambulance systems can work to suppress or misrepresent volunteer interests if they are inadequate for allowing volunteers to represent their collective concerns. Passive resistance can be seen in the quiet complaints and non-compliance with rules and regulations (Scott 1985). In this way existing inequalities that are culturally and structurally embedded will not be challenged.

The role of managers' power in suppressing or misrepresenting volunteer interests will be supported through an examination of consultation processes within one service. A strong rhetoric of volunteer consultation existed within some services, but it has not necessarily worked to improve the previously identified inadequate communication with volunteers. Moves towards volunteer gatherings that are beyond the local team level may provide some promise of collective voice for volunteers.

Many ambulance service changes were given validity through claims of good consultation processes with volunteers, which represented volunteers as having agency in the change processes. However, the study found that the levels of volunteer consultation were often exaggerated or inadequate and that the Staff Volunteer identity allowed minimal levels of consultation with volunteers to remain hidden. Consultation that is not clearly defined and systematic, in hand with a Staff Volunteer identity, can hide a lack of consultation with volunteers.

During the life of this study there were several examples where talk of consultation with volunteers was more rhetoric than reality. Following the

recommendations of the SUBC report for improved communication with volunteers a new discourse of consultation emerged. The high level of consultation with volunteers was highlighted for all of the new processes initiated to deal with volunteer issues:

*Executive Manager Bob:* And it's because you need to build that culture into the fibre so that even though it's mainstream, it's very uniquely recognising the particular needs of volunteers within that and allowing volunteers to have the proper consultation and input and influence on how those structures work and we've got good structures for that. We've got a well-established regional consultation system through the rural area and an advisory committee. We've got some very powerful people on that, and even within that there's a shift in focus. There's a group emerging that really want that to be more like an advocacy group, more like a volunteer association, a volunteer union, and I see that developing over time and the volunteers that are coming forward will expect more rights in the ability to advocate their point of view and will become quite vocal and maybe even quite militant ...

Bob highlights the structures and systems that exist within the service for volunteers to enable 'proper consultation and input and influence'. He foregrounds the positive role of the organisation in providing these structures and then moves the theme to talk about trends towards more assertive volunteer voice. He makes the link between consultation and power, but represents volunteer power as a future threat<sup>35</sup>. When he states 'the volunteers ... will expect more rights ... will become quite vocal and maybe even quite militant' he moves from talking about consultation as a positive process to a threatening advocacy process. He switches to words like 'rights', 'union' and 'militancy' which have negative adversarial connotations, unlike 'proper' consultation and 'input' and 'influence'. While he foregrounds the militancy and risk of adversarial advocacy along with the 'power' of volunteers, he backgrounds why such an approach would be necessary if the organisation already had such a 'good system'.

Bob promotes consultation as a positive process and advocacy style representation as a negative process. For a manager, this is no doubt the case as consultation unlike a system of advocacy allows management to codify (reframe) issues of volunteer voice and to facilitate misrepresentation of the issues. Hence for Bob consultation is a good system, but a system of advocacy and representation is

<sup>35</sup> This future volunteer threat is part of the Self-interested volunteer identity

threatening, because it does not allow management the same opportunities for re-interpreting and foregrounding or backgrounding issues of choice. Hidden within the volunteer consultation discourses generally is the lack of power of the consulted because while consultation involves asking for an opinion from volunteers, there is no need for managers to act on the subsequent information.

The Staff Volunteer identity compounds the weakness of volunteers in a consultation system as it allows managers to claim volunteer consultations without any requirement to state with whom or even how many people were consulted. In this way the term staff could be used to disguise a lack of consultation with volunteers or one volunteer could be consulted as ‘volunteer consultation’. Within the service there were struggles over who should be consulted and the use of terminology and some volunteers complained about the lack of genuine consultation with volunteers.

An aspect of the problem of lack of volunteer voice was that ambulance managers were often ready to speak for volunteers in a paternalistic manner. This paternalism is seen in the following excerpt:

*Manager Canon:* I know for a fact from the feedback from my volunteers that the only area of dissatisfaction is the expectations of training...

Canon represents as a ‘fact’ that the ‘only area of dissatisfaction’ for volunteers is training expectations. Canon claims this is a result of feedback, thereby providing an evidence base to the claim. Canon takes ownership of the statement and also of the volunteers when he says ‘my volunteers’. This paternalistic approach denies the differences within volunteer circles and presents volunteers as a homogenous group. While other data clearly highlights that this ‘fact’ is not true of all volunteers, it is the power of Canon’s position that can make such facts seem true. As Canon reports such ‘facts’ up the line, they become taken for granted knowledge within the service and appear to be based on volunteer consultation. This process allows managers to retain control of common-sense knowledge and to contain dissenting voices.

Geographical distance which makes face to face contact difficult, in hand with inadequate communication infrastructure, underlies the isolation of rural volunteer groups. Even though new electronic technologies promise hope of improved communication, the high costs and lack of rural infrastructure limit the effectiveness of such technologies in rural areas. Over the life of this study, it was seen that often modern technologies can work to increase isolation as rural populations struggle to achieve the level of infrastructure requirements that will allow them to join the information revolution.

*Anonymous Volunteer (673):* No access to internet training materials. Not on address list for any newsletters - cannot always get to station to read notice boards!

*And*

*Anonymous Volunteer (183):* I think we should have internet access on station so while on duty we can use it for study. Also a better computer with CD rom to use on duty, again for study.

*And*

*Anonymous Volunteer (456):* Any further formal training is near impossible. To go to Intermediate level will take 3 weeks for each of the next 2 years - a 1 week course, 1 week in hospital and 1 week on job assessment for each section. This is all of my annual leave for 2 years and is, for me, unjustifiable. However, if this training was offered nights and weekends, over the internet and with video-conferencing access, it would be achievable. The one week at the hospital would have to be annual leave, and hopefully the 1 week on job could be done at nights or weekends. At the present time, this is not offered as an option.

The volunteers themselves can see the benefits of new technology for assisting communication and training, but are hampered by old or absent infrastructure. One of the volunteer above requests a 'better computer with CD Rom' which indicates the age of the station computers. The problem with infrastructure is worsened by an increasing disparity between rural/urban areas. For example, as urban areas increasingly are connected by high speed electronic communications, services increasingly rely on this as a medium of communication. However, when rural ambulance stations are linked to internet services that remain slow and unreliable, counter intuitively the rural workforce is increasingly left out of the information loop. In these ways rurality compounds the problem of communicating issues for volunteers because geographical distance creates a barrier to developing a collective identity and voice.

Systems that help to break down the barriers of distance and create opportunities to develop a collective voice may be a promising means of facilitating a stronger volunteer collective voice. In several services, collective gatherings of volunteers beyond the local team level are being initiated. However, such methods are likely to be costly, and may initially be seen as threatening, as the following excerpt suggests:

*Volunteer Leader Gwen:* one of the things that has really improved was these team leaders and volunteer training officer weekends where you got the rural ones together and talked, and it was great because all of a sudden you were, you know, talking to your peers about, you know, how do you run your station, which was never happening before and initially at first a lot could see it as a threat because all of a sudden we were discussing, you know, “Well, why can’t we do that? Well, why can’t we do that as well?” And it was like, “Oh, how dare you sort of like form a group and, you know, bringing issues and fighting this” we’re all, you know, instead of being 69 little separate stations all of a sudden we’re speaking as one voice and we’re all the same. We have similar issues.

Gwen provides an evaluation of how the ability to meet with volunteers from other areas becomes an opportunity to develop a collective identity and voice. Gwen highlights the benefits of groups of volunteer leaders meeting to discuss issues and problems - ‘we’re speaking as one voice’ and ‘we have similar issues’. However, the sudden ability of volunteers to develop a collective voice on issues that are outside the managed communication processes can also create an adversarial tone when volunteers attempt to advance their interests. Hence Gwen’s comment about volunteers being represented as ‘fighting’ has resonance with Bob’s imagery of a new ‘militant’ voice. However, while this more collective voice may be perceived as threatening there are increasing moves to support more collective meetings for ambulance volunteers at regional, state and national levels. One result of these collective meetings will be a broader ambulance volunteer identity that goes beyond the local volunteer team.

Another form of collective ambulance volunteer voice that has emerged is the Associations of Volunteer Ambulance Officers. Two Australian states have such Associations and they tend to work closely with ambulance services to represent volunteers at a state level. These Associations can have a valuable role to play in supporting volunteers as evidenced by one that was closely involved in the establishment of the SUBC. However, at a broad state level a vocal membership

has proven difficult to achieve, and in general when able many volunteers do not engage in service based issues through such forums. This lack of engagement with organisational bureaucracy issues is reflected at more regional service levels too and the identification in the previous chapter of the local service focus of volunteers in hand with time shortages suggests that most ambulance service volunteers are not likely to commit time to political/advocacy issues. Instead service mechanisms need to ensure that volunteers can raise issues and be heard within normal communication channels.

Collective gatherings of volunteers and the emergence of new PSO positions provide examples of promising cultural and structural changes for volunteers' working to improve conditions and increase resource allocations. This section has shown how identity work that is driven by managers can be advantageous to volunteers while there is an overlap in interests between the two groups. However, in areas where there is no overlap volunteers may be unable to progress their interests. Consultation systems can facilitate a form of 'roadblock' that hides the lack of volunteer collective voice. The major risk with systems that do not provide avenues for volunteer collective voice is that inequitable conditions will continue as changes are made that misrecognise and reframe volunteer issues but only superficially deal with volunteer interests.

### **Culturally and structurally maintaining inequities**

While the Staff Volunteer identity has enabled extra resources for ambulance volunteers by bringing them under the ambulance service field, it has not addressed deeper structural and cultural inequity within ambulance services. This maintenance of inequity is possible firstly, because as identified in an earlier section, Staff Volunteers can become invisible not only during consultation processes but whenever it suits the interests of those writing or talking about volunteers. In this way agency and culture retains a generative effect on volunteer inequity. Secondly, the structural inequity required not only extra resources, but process changes that ensured system equity for volunteers. Through implementation processes, agency and structure can maintain a generative effect on volunteer inequity.

Culture and agency interact through the Staff Volunteer identity to maintain inequity through the polyvalent use of the term staff. Managers can use the term staff to either include or exclude volunteers without needing to specify who is included. There are several examples within ambulance annual reports where the use of wording makes volunteers invisible on significant matters. For example, volunteers were almost invisible in a ten page 'Human resources' Annual Report section that contained statistics about employee numbers and sick days, and dealt with issues such as: occupational, health and safety issues, equity issues, gender issues. The reader can infer that the term staff generally refers to only paid staff by looking at the total figures, but this is never made explicit. In other cases, for example the information on occupational health, safety and injury management, it is impossible to ascertain whether volunteers are included within the occurrence numbers. When volunteers are excluded from policies that deal with considerations of equity and diversity this fact is hidden by the move from the generic term staff that includes volunteers to the use of the term without volunteers. While it is a problem that a large volunteer workforce is excluded from policies designed to protect workers, it nevertheless remains an invisible problem.

Agency and structure interact to maintain inequity through the processes of resourcing and delivering change. For example, in one service, a new Volunteer Management Team was introduced. However, the team was loaded with the responsibility for dealing with all the service volunteer issues identified by the SUBC report. The team was meant to deal with all volunteer issues, including HR issues, and ended up with approximately fifty projects to address volunteer issues, along with dealing with all HR issues for several thousand volunteers. The unit was placed directly under the supervision of a member of the executive with an interest in volunteers, but was not linked to HR or to the regional management. It was a 'special' unit, which was apart from all the other mainstream departments. This structural change both appeared to be working to resolve volunteer issues while continuing elements of the status quo. The level of misrepresentation is evident in the following excerpt:



*Manager Reg:* The way it was originally portrayed to the regions was that the volunteer management team would be a central hub for volunteers to go to within [the organisation] and have queries answered etcetera, for example if somebody had a problem with the ambulance they would contact the volunteer management team person in the workshop who would specifically handle volunteer issues. That's originally how it was portrayed, I guess you could say, but it's actually turned out to be slightly different and they're more project focused and....

CS: So what you're saying is they were initially meant to be there as a personal link, were they?

*Reg:* That was how it was initially portrayed, yes. But it didn't quite work out that way I don't know if that was necessarily deliberate but as a result of that, I guess I'm being quite frank, there was...some disappointment from the volunteers that they thought the volunteer support team wasn't actually doing what it was portrayed to do.

While Reg does not lay blame nor offer explanation for the difference between initial portrayals of the volunteer management team and their subsequent focus, he does foreground the eventual disappointment of the rural volunteers. Structurally, the lack of linkages of the Volunteer Management Team to the normal service processes excluded the team from normal budgets, policies and procedures, (a continuation of the economic powerlessness of the Moral Volunteer). However, at the same time the team were made visibly responsible for dealing with volunteer issues. The following excerpt follows a visit by the interviewer and interviewee to a rural volunteer unit where volunteers had claimed there 'hadn't been any changes':

CS: And how did you feel when we went out to [rural town] and the volunteers were saying 'what changes?'?

*Anna:* Yeah I know. It's extremely frustrating and I think the 'unit' has become the focus of a lot of negative, kind of, feedback and feelings from volunteers because it's the only area they can see that's actually doing anything in relation to volunteering. So unfortunately, there's good feedback that comes through, but there's also a lot of negative feedback because people don't understand...

Anna identifies the problem with the Volunteer Management Team. The 'unit' became the flag bearer for all volunteer problems within the organisation and was set to fail because of inadequate resources. While the team had been given more resources than had previously been allocated to volunteer management, they were still quite inadequate for the tasks assigned. This under-resourcing continued a pattern of inadequate resources over a long period, which was facilitated by creating a 'special team' to deal with volunteer issues. Like the Moral and

Professional Volunteer identity the Staff Volunteer could be set aside and be treated differently to the paid staff.

While it was possible to maintain a structural inequality through different (under resourced) administrative structure for volunteers using the Staff Volunteer identity, the cultural difficulties in blending the Moral and Staff Volunteer identities highlighted problems in treating rural and urban services differently. As the Staff Volunteer identity positions the services with responsibility for rural ambulance service delivery, the long-term manner of providing a different level of service to rural areas was not easily justified.

### **The inequity risks of a discourse of community partnerships**

A move to community partnership discourses is used by ambulance managers to fill a ‘community responsibility’ gap left by the move from Moral and Professional Volunteer identities to the Staff Volunteer identity. Rural inequity may remain as an underlying problem for volunteer serviced populations unless changes specifically address the economics of the rural/urban division. Currently community partnership discourses maintain the position of rural populations as communities of disadvantage that need to contribute towards ambulance service provision.

The absence of a discursive framework for including rural communities within the Staff Volunteer identity is dealt with through the introduction of new discourses of community partnership. New ideas of community engagement, community partnerships and community reciprocity emerged in the discourses to take over the role that ‘volunteers helping the community’ had played. Community partnership discourses helped to establish how services interact with communities, with talk of new models of interaction. However, while community partnership models offer promises of negotiated services with rural populations, they also work to maintain rural communities as responsible for services.

Community partnership discourses fill a gap left by the change to the Staff Volunteer identity, which is not framed around communities in the way that the

Moral and Professional Volunteer identities are. The following excerpt demonstrates the focus of the new discourses:

*New Manager Sally:* so the whole organisation's focusing on community engagement through consultation, more local solutions for local communities, etc., etc., and as you know we're doing it with indigenous and first responders, etc., etc., so that's just very much evolutionary.

The communitarian discourse of 'local solutions for local communities' is premised on consultation with communities (Etzioni 1993). The previous section highlighted the problems with 'consultations' in a situation of power imbalances between volunteers and managers, and there is a strong risk that similar matters of consultation control could be used with rural communities. Sally notes that community engagement is beginning with 'indigenous and first responders' and while 'prima facie' engaging communities in discussions about services is important, the underlying power base and capacity of the communities should be considered.

The framing of the discourse in terms of local solutions is premised on rural populations having the local capacity to identify and meet local needs. The following excerpt highlights how capacity and need are linked:

*Andrew:* And so what I'm saying is, that it's basically like, the best way of describing it is to have a row of cookie jars on the mantle piece and when you go to a community and talk to their leaders, and I guess the movers and shakers in a community and explain who you are, what you are, and what you'd like to do for them and ask them what they would like, and then together, on a consultative basis work out what they can sustain, what the financing of it will involve, how each can interface with the other to try and work that through, then you start looking at the mantle piece and saying, well I'll have one of those, one of those and something else and that makes up what we want to start our program. Three years down the track you may well find that you can choose another cookie jar because people are interested, committed and have begun to become interested in what they're doing.

Andrew promotes the community engagement as being based on asking communities 'what would you like'. However, this is quickly linked to considerations of 'what they can sustain, what the financing will involve'. Andrew then using a 'cookie jar' analogy suggests communities could select different models of delivery based on different service components with a foregrounding of the issue of choice. However once again, when discussing how these flexible models will change, Andrew suggests that 'you may find you can

choose another cookie jar because people are interested, committed”. This statement highlights the reliance on community contributions in allocating ambulance services. While choice and flexibility are foregrounded there is no talk of minimal standards or equity and yet other studies have found that regardless of rurality, people want an ambulance service that can respond quickly and professionally to emergency needs (O'Meara 2002: 168). The whole idea of community partnerships is premised on community contributions towards ambulance service provision. The emergence of problems with health based community partnerships (Scrimgeour cited in Wakeman, and Lenthall 2002) was discussed in Chapter Three, where the resulting services depended on the capacity of communities. This reliance on community capacity means that the communities most in need may actually receive the least services.

The linking of consultation, need and capacity therefore repositions rural communities as responsible for the level of ambulance services within the community. ‘Moderns’ have moved further towards the Staff Volunteer identity and community partnership approach and annual reports showed how the reallocation of responsibility for rural services to rural populations can be normalised. The following excerpt is from the CEO’s section of an annual report:

*Annual Report Modern 2004:* Once again this year, support from rural communities through Branch Auxiliaries, Ambulance Community Officers and first responders working closely with our professional staff, has demonstrated that our ORG is seen as an essential and integral service to support rural communities and rural areas.

In this excerpt rural communities are represented as providing support through three groups of ‘members’: auxiliaries, community officers and first responders. The premise of the excerpt is that the support from rural communities demonstrates that the ambulance service is ‘seen as an essential service’ to support rural communities. This circular logic foregrounds the community and backgrounds the organisation in terms of responsibility for an essential service. It implies that in the absence of community support the ambulance service may not be considered a necessary essential service. In a flip-flop fashion the onus is on the community to demonstrate commitment to the ambulance service in order to receive services.

The risks of representing rural ambulance services and volunteers within a framework of community participation and reciprocity are that inadequate services can be blamed on the community, and responsibility for services can be turned back onto rural communities. Poor co-operation, low numbers of volunteers, and a lack of funds from the auxiliary, can all become the problem of the local community.

In this section I have highlighted how a community partnership discourse that links community participation to community need may work to maintain the deep inequity in rural service provision that existed under the Moral and Professional Volunteer identity. It is not that the concepts of community engagement and partnership are themselves inequitable, but the manner in which they are framed and delivered can make them so. A focus on consultation (without outlining a rigorous process), which hides the reliance of community partnerships on community capacity suggests that communities inherently are capable of interacting with ambulance services. What are missing from the community partnership discourses are discussions about equity and minimal standards, and acknowledgement of the effects of power imbalances that exist between urban and rural populations.

## **Conclusion**

This chapter has highlighted a culturally and structurally embedded economic weakness for ambulance volunteers arising from a managerial control of volunteer identity work. Binary oppositions, such as paid/unpaid, moral/amoral, rural/urban, professional/amateur all have a major role in ensuring that the categorising of volunteers limits their economic power. The domination of volunteer identity work by managers at the interface between volunteers and ambulance services has a broader implication for rural volunteer serviced populations. A rural volunteer workforce becomes hidden within a rural/urban categorisation and when the volunteer economic weakness is actualised into an organisational structure it sets rural services apart to receive fewer resources than urban services. Rural populations receive an inequitable ambulance service because the volunteer workforce allows service delivery to occur without the full economic costs of the

service being understood or calculated and without the full contribution of volunteers being accounted for.

Ambulance volunteers operate only as Primary Agents as it is managers, not volunteers, who have the collective agency to effect volunteer identity change. The maintenance of the Moral Volunteer identity dominance within services was effected by controlling representations of volunteers which in turn became normative and inculcated into volunteer identities. Equally, when identity morphogenesis occurred this was initiated by managers to meet managers' needs, which benefited volunteers in areas where interests overlapped. Representative systems did not effectively represent volunteer interests, which allowed managers to control representations of volunteers and to misrepresent their interests and agency when interests clash.

Normalizing of the rural community discourses deflects questioning about why essential rural services should be conceptualised so differently to urban services. What are missing are discussions about minimal standards and funding arrangements for rural services. While it would be unreasonable to suggest delivery models should be the same in urban and rural areas, as there are some obvious differences in terms of population density and geographic distance from major acute services, it is the exclusion of equity and economic issues in the framing of the rural service discussion that is criticised here.

The next chapter will look at the theoretical understandings and the implications from these findings. In particular, the role of agency will be examined more closely, using Archer's (2000) framework of Primary and Corporate Agents. Archer's theories of Primary and Corporate Agents provide a useful framework for understanding the theoretical implications of the findings from this study. The personal and local benefits of the Moral Volunteer identity place volunteers as Primary Agents without a strong collective voice. The ability of managers to maintain or change volunteer identities places them as Corporate Agents within the ambulance service. The inability of volunteers to promote their interests is ultimately detrimental to the ambulance services as recruitment and retention become increasingly difficult.

The contribution of this thesis in understanding how volunteers interface with ambulance services through identity work will also be further examined to consider the broader implications. The effects of an economically weak volunteer workforce on the populations they serve suggest that this thesis has implications for community partnership approaches to service delivery and for how service volunteers are understood in a communitarian framework.

## Chapter Seven: An Explanatory Theory of Volunteering

*“Neither identities nor interests neatly come before the other; the struggle to achieve what we believe to be in our interest shapes our identities as much as the identities determine what we see as in our interests. The point is that neither is altogether fixed. Both are produced and altered in the course of everyday social projects and collective mobilizations of varying scale.” (Calhoun 1995: 216).*

This study has examined the interface between ambulance volunteers and ambulance services using identity work as a lens, in order to increase understanding of volunteer agency and to contribute to a theory of volunteering. Interests and identities are closely linked as Calhoun points out in the opening quote. This chapter provides a discussion on how the findings detailed in the previous two chapters contribute to meeting the research aim: to *explore volunteer agency through identity work in health services to inform a theory of volunteering*.

The critical realist approach in hand with Foucauldian concepts provided a conceptual framework that could consider agency, culture and structure, without privileging any one element. The empirical study findings allow the analysis to move to theorising through retrodution<sup>36</sup> and explaining what happened when indirect evidence of power was found (Bhaskar 1975; Marsden 2005: 135; Morriss 1987: 124).

’Realism and Foucault can agree that power is relational, that the mechanisms of social relations are non-empirical, that while social practices are conceptualized their interconnections seldom are and therefore must be revealed through abstraction and reconstructed through empirical history.’ (Marsden 2005: 155)

<sup>36</sup> To re-iterate from Chapter 1, retrodution is similar to induction but is predicated on known or assumed rules.



The identity framework used in this study has shed light on aspects of volunteers and volunteering that have not previously been examined. There are three key findings from this study which contribute both to answering the research question and to informing a theory of volunteering. Firstly, the development of an explanatory theory of volunteering emerged from the findings. The theory operates at a broad level and rests on a focus on interests and identity, not with a narrow rational man approach but using a more holistic understanding where emotions and society are bound up in individual interests [similar to what Archer terms commitments (2000: 83-85)]. Such a focus advances understandings of volunteering and volunteers and provides linkages between the findings of other studies. The theory also operates at a middle level to shed light on matters of agency and resource distribution. At this level the study supported existing knowledge on a secondary volunteer workforce and urban bias and identified some of the generative mechanisms affecting volunteers in ambulance services. Together, these theoretical layers enable a description and explanation of the volunteer/ambulance service interface.

A lack of collective agency for ambulance volunteers is the second key finding from this study. The study has highlighted that while ambulance volunteers retain agency, following Archer (2000), it is only as Primary agents that they operate within ambulance services, not Corporate agents, which has significant implications for current neo-liberal and communitarian discourses.

Thirdly, the interplay between ambulance volunteer agency and cultural and structural real conditions resulted in volunteer inequity. An underlying causal mechanism of this inequity was the ‘othering’ of volunteers and rural populations which led to volunteer troubles and limited volunteers to a collective Primary Agency.

### **Volunteer interests and identity – an explanatory framework**

By using identity work and a critical perspective as a theoretical lens for examining ambulance volunteers, the explanatory value of interests in

understanding volunteer involvement and interactions with services has been demonstrated. Interests are best understood in a manner that moves away from both a narrow focus on the material interests that are based on 'what we need to survive, thrive or excel' (Archer 2000: 175). Instead interests need to incorporate the concept of a people as reflective social beings, who engage in a range of emotional concerns, along with practical and natural conditions in the world. Emotions are elevated in such a framework to acknowledge their importance in the way individuals form and prioritise their interests (Archer 2000: 194-195). The world in which individuals engage is a stratified world where all is not equal, and so we have the 'stratified social subject' (Archer 2000: 259) with agency, interests and life chances that are embedded within a cultural and structural world. And thus service volunteers can be understood to engage with service organisations because their interests and life-chances prompt them to do so.

The theoretical framework also proved useful in providing linkages between the findings of other studies. By moving away from a narrow debate around either volunteer self-interest or altruism, the framework provides a deeper understanding of the volunteer/ambulance service interface. The utility of this framework for studies of volunteering will be further supported in this section by comparison with the knowledge that has been developed through other research approaches and by demonstrating how identity work can help to link bodies of volunteering knowledge.

### A diversity of volunteer interests

Ambulance volunteers cannot be understood as a homogenous group with simplistic motivations, rather they need to be understood as a diverse group of individuals with some collective interests based around their ambulance volunteer roles and other shared life circumstances such as their rural location. Shared and competing interests of ambulance volunteers and others were found within the four ambulance volunteer identities delineated in this study.

These ambulance volunteer identities both reflect and constrain interests and have different impacts in ambulance identity work depending on who uses them. To recap, the four identities accompanying the ambulance volunteer role in Australia

and New Zealand are: the Moral Volunteer, the Professional Volunteer, the Staff Volunteer, and the Self-interested Volunteer. Ambulance volunteers only position themselves within either the Moral and/or Professional Volunteer identities and aim to meet a variety of interests through identity work that include resources, reputation, connectedness, and knowledge. They meet their interests in varying degrees through the different volunteer identities, as do managers.

Volunteer interests may include material interests such as resources for delivering ambulance services like vehicles, training and equipment. Other more personal material interests included career opportunities, social capital, and status. Other interests such as self-esteem reflect more emotional concerns, but even material interests, including economic, social and cultural capital, should not be considered purely in resource terms as such an interpretation returns to a rational man view of volunteer interests. Instead, the complexity of interests uncovered should be understood in terms of individuals' fulfilling their personal identities in a reflexive and emotionally connected manner.

Status is important in terms of both personal identity and life chances and provides a good example of how both material and emotional interests may be invested within the same concern. Status can improve life-chances in terms of the groups that one can access and the opportunities on offer. However, ambulance volunteers also meet emotional interests through the status of an identity as they gain a sense of 'well-being' when others recognize and admire them (Lenski 1966: 38). Recognition is central to issues of identity and the choices individuals make (Calhoun 1995: 213). Status is linked to a psychological need for self-respect, which has been shown to be largely "a function of the respect accorded by others" and therefore our sense of well-being is "greatly dependent on our status in the groups we value" (Lenski 1966: 38). Recognition and respect therefore are a prominent factor in the interests of volunteers using the Moral and Professional Volunteer identities as they reinforce the volunteers' personal and social identities.

But not all interests provide both material and emotional benefits and depending on the individual's priorities either material or emotional interests may be selected

above the other. For example, attention on building strong local teams may be the volunteer's focus in order to meet the interpersonal interests of respect and networking. Take Carmen as an example (:184), Carmen firmly identifies as a Moral Volunteer, and indicated that reimbursements were not necessary to her ongoing volunteer involvement. For Carmen, a 'making do' attitude and an ability to be frugal with ambulance resources, were more important than material rewards as these traits fitted with both her personal and social identities, and were reinforced by her long-term experiences of community helping in rural areas. Or take the example of the volunteer survey recipients who felt that 'the time needed for training is too much to ask'. For these individuals, extra training requirements conflicted with either their other commitments, or their understanding of themselves as helping volunteers. For these volunteers, working towards their interests involved resisting pressures to undertake extra training. These examples demonstrate how a variety of interests can be found within ambulance volunteer identity work, and the prioritizing of interests can be seen through the identity choices made by individuals.

Archer's (2000) framework provides a fuller understanding for how volunteers combine individual and collective interests at the ambulance service interface. The individual reflexively assesses and adjusts prioritized interests (commitments) which are enacted and reflected through personal and social identities (Archer 2000: 295-305)<sup>37</sup>. So the Moral Volunteer, who prioritizes the local collective good, also reinforces aspects of their personal identity and gains self-esteem by participating in a caring and moral social identity.

As an example, picture the individual who is invited to join the ambulance service by friends, and therefore joins a group of like-minded people who feel connected to each other and the broader community. The normative idea of helping which may be inculcated in their personal identities is expressed through the activity of

<sup>37</sup> Archer uses a more fixed notion of identity than used in this study, which adopts a more multiple and fluid notion of identity. Please refer to the conceptual framework in Chapter One for a fuller discussion.

ambulance volunteer work and through the social Moral Volunteer identity. The volunteer meets organisational requirements such as training because it is necessary to sustain them in the ambulance volunteer role, which provides avenues for expressing a personal and social identity. Any volunteer whose commitment to the Moral Volunteer identity was based on group membership and helping is therefore likely to work to reinforce close social networks as this is a priority interest for them. The negative aspect of this may be that they could also work to exclude others who do not fit the group's normative pattern of helping and thereby threaten their social identity. This story of connections and interplay suggest that while a Moral Volunteer identity can reinforce a moral community outlook it is not necessarily effective for service provision. The helping ideal could indeed support amateurish approaches.

Another individual on the other hand, may join because they have an interest in health care or a commitment to maintaining a local ambulance service. Such a person would be more invested in the ambulance work than in the connectivity of the local team and would position themselves within a Professional Volunteer identity. Because their identity gains are based more on the proficiency of the ambulance volunteer role, at a personal level their self-esteem requires knowing that they have the training and expertise to help, and at a social identity level, receiving recognition as a trained and qualified professional becomes important. Such a person may feel frustrated as they see the deficiencies in the local service provision and the ambulance training and support program, and this would be evidenced by argument and complaint within identity work.

These two scenarios suggest how the identity work evident in collective level identities are relevant at an individual level and how personal and social identities interact. The interests evident within ambulance volunteer identity work depend on the individual's personal identity and on their life chances. However, because volunteers will have some life situations (such as rurality) in common with other volunteers, groups of volunteers will have collective interests. They may attempt to meet some of these collective interests through the ambulance volunteer role, but equally, the ambulance role will bring with it some collective interests.

## Collective interests and good citizens

A focus on interests allowed this study to move beyond a methodologically individualist account to capture information about the collective interests of volunteers. Through the Moral and Professional Volunteer identities volunteers show how collective interests and concerns underpin their engagement in ambulance services. The Moral Volunteer identity reflects collective concerns with community membership in the form of helping others, while the Professional Volunteer identity reflects collective concerns that are more specific to the provision of ambulance services. Both of these identities reflect a collective interest that is not focused on the individuals own ambulance role but that is focused on the broader community groups of which they are members.

Collective concerns do influence the way that ambulance volunteers prioritise interests, with the result that their actions will not always be rational from a self-interested perspective. These findings could lead some to claim that neo-liberal policies are successful in that they increase citizen participation in services, and they do not undermine collective norms and values. As well the assumption of a collective goodwill that underpins communitarian citizenship theorists (Etzioni 1993; Stretton, and Orchard 1994) also find some support from these findings. However, neo-liberal and communitarian proponents need to be able to incorporate a more complex citizen with multiple, and competing interests into their theories.

There are two elements to ambulance volunteer's collective interests that are problematic in their role as service providers in state based service organisations. Firstly, their focus is on local collective interests, whether that 'local' be a rural town or a district. That is, the volunteers' focus is on either the helping or service provision elements at a close geographical level. This finding is somewhat at odds with the findings of Milligan and Fyfe (2005) who found a decrease in local identity with increasing centralization of voluntary agencies (:428). They also linked increasing professionalisation and bureaucratic structures to an increase in the passivity of volunteers. However, Milligan and Fyfe interviewed coordinators, and regional and national managers of selected voluntary agencies (2005: 423) and

did not talk with local volunteers. As this study shows, managers and volunteers may use different volunteer identities, and it is likely that it was the managers in Milligan and Fyfe's study that had a less local view of volunteer services. Ambulance volunteers retained a focus on local collective interests despite increasing discourses of managerialism and professionalism within the ambulance services. An alternative explanation for the difference in findings between this study and Milligan and Fyfe, is that the organisations studied by Milligan and Fyfe may have moved further down the path of managerialism changes than the ambulance services studied here, and their results may demonstrate the ability of managerialism to undermine local collectivism over time. The element of time involved in changing identity work will be discussed further later.

The local collective interests of volunteers are important in how volunteers interface with ambulance services and directly relate to some of the difficulties and troubles evident in this interface. The focus on local interests means that volunteers are difficult to engage in broader organisational concerns and policies when they are not considered relevant to their local context, and this local focus reinforces the cultural and structural barriers to volunteers as an economic force within ambulance services.

Volunteer identity work that focuses on local interests, membership of local teams, and local services therefore contributes to the community/ambulance divide found in this study. Many volunteers do lack interest in broader organisational concerns and it can prove difficult to engage them in new policies and changes unless they see the relevance to the local concern. This was reflected in the way that many volunteers felt that 'paperwork' and administrative details should not be a volunteer concern, and links strongly to the idea that volunteers are 'helping' the community not the organisation. For some volunteers the management catch-cry of 'they're not interested' will be based on a real disengagement of volunteers with organisational processes. This local focus of volunteers in turn makes it easier for services to justify the lack of consultation and involvement of volunteers in decision making found amongst ambulance services.

A second consideration to the understanding of ambulance volunteer collective interests is that not all collective interests may be equally useful in ensuring service delivery. While communitarian views of citizens can be understood to take a rose-tinted view of collective voluntary action with assumptions of inherent good, not all collective interests should be considered equally useful in terms of delivering ambulance services. This does not mean to suggest that some ambulance collective interests are based on the ‘dark side of volunteering’ (Cox 2000). But this study found that the focus of the Moral Volunteer identity on helping, being likely to meet more local social and moral outcomes, was not as useful in providing a critical health care service as the Professional Volunteer identity.

A more professional focus on service delivery and service outcomes was found in the Professional Volunteer identity which led to more questioning and challenging of service standards and stronger desire for training and service facilities. A collective interest based on the provision of local service is more helpful to local community members requiring an ambulance service as it translates into a stronger commitment to service quality. This finding suggests that advocates of virtuous collectivism (Etzioni 1968, 1993; Stretton, and Orchard 1994) may not be able to rely on the efficacy of such collectivism for service provision. A moral collectivism may be useful for the development of a moral and cohesive society but not necessarily for the delivery of services.

### Interests linking the individual and the social

Focusing on interests allows a linking of previous volunteer explanatory frameworks with a contextualized explanation of cultural and structural conditions. The multiple motivations uncovered by previous studies can therefore be seen in a more holistic light as an identity and interests framework, which facilitates linking between the influences of the individual and society.

While Olson’s (1965) rational man is clearly shown to be too shallow an interpretation of collective actors such as ambulance volunteers, so too is the functional approach to volunteer motivations (Clary, and Snyder 1991; Clary et al. 1998), though both theories have important relevance for volunteers. Volunteer’s



commit to volunteer service because the volunteer identity, in this case the ambulance volunteer identity, represents an opportunity for them to meet either one or several interests that they have prioritized within their particular life situation. The difference here with the rational man world view (Olson 1965) is that there is no reason to believe that the decision to take on a volunteer role needs to be economically rational, as the economic aspects would depend completely on the individuals stratified situation and the interests that the individual had prioritized. The key difference with the functionalist approach (Clary, and Snyder 1991) to explaining volunteering is that the stratified situation of the individual is brought into prominence and the focus moves beyond the individual to encompass the influence of cultural and structural conditions of society on volunteer motivations.

Equally, because the volunteer is understood to be socially stratified in this explanatory framework, the literature that emphasizes the role of social norms in prosocial behaviour (Gintis 2003) can be incorporated without social conditioning being given undue prominence. The developmental and reflexive understanding of identity proposed by Archer (2000: 288-291) can be used to explain how family and group norms of altruism influence the development of personal identity which may become a prioritized interest that is sought through volunteer work.

The use of interests and identity work as an explanatory framework also places this study apart from the work of Grube and Piliavin (2000) who focus on roles and identity. They suggest volunteers develop a 'volunteer role identity' where the role becomes part of the volunteer's personal identity and that this development is necessary for sustained volunteering. While roles are an important aspect of the stratified world, all interests cannot be subsumed within roles, as this approach relies on normative conventionalism (Archer 2000: 285). While the use of role theory by Grube and Piliavin shed fresh light on volunteer studies, their theory over-emphasized the ability of roles to socially construct volunteer subjects and maintained a focus on the individual volunteer.

This study of ambulance volunteers found that it was the identity work surrounding the ambulance volunteer role that provided the greatest insights. By

focusing on identity work, the individual volunteers were found to reflexively exercise choice to meet their interests and were not purely a result of the normative conventions of the ambulance volunteer roles. While the ambulance volunteer role is a resource for both the volunteers (Grube, and Piliavin 2000; Piliavin et al. 2002) and the organisations studied, the role and the volunteer's interests should not be confused.

## The interests of managers and others

The interests of managers and paid ambulance staff are reflected in two new volunteer ambulance officer identities, as managers aim to meet conditions of limited resources and declining volunteer numbers. Broad professionalisation and managerial trends that are linked to neo-liberal policies have influenced ambulance services to varying degrees, reflected in the typology of services from 'Traditionals' to 'Moderns' as well as volunteer identities. The Staff Volunteer identity is most strongly linked to new managerial discourses evident in 'Moderns' and 'Nearly Moderns', and was introduced by 'new managers'.

Identity work demonstrates the conflicts that exist between ambulance managers and volunteers. Managers can not be treated as a neutral disinterested group as they have the role of maintaining power and dispersing limited resources to ensure an ambulance service is delivered. Tilly and Tilly (1998: 97) state 'employerworker relationships are embedded in hierarchical organisations (firms), which confer authority on the employer...'. Several studies have shown that maintaining power is a goal of managers and that they will work to guard this power (Noble 1979 cited in Tilly, and Tilly 1998: 100-101; Tsoukas 2000).

Managers are able to selectively promote or block innovations to achieve their own ends of control, co-operation, efficiency, and effectiveness (Alvesson, and Willmott 2003: 12; Tsoukas 2000: 39). So any discussion of conflicts over interests between managers and volunteers must be read in light of the fact that managers are a group with their own need to negotiate interests, and that maintaining power is one of these interests. For example, when the manager wrote to volunteers to clarify the re-imbursement situation (page 238), managerial interests of cost-saving and maintaining power in the re-imbursement situation,

would have vied with the desire to secure a longer term commitment from the volunteer workforce. This resulted in a very value laden text piece on the issue of volunteer re-imburement.

The quality and efficiency objectives that underpin managers' work are culturally constituted concepts and are influenced by broad social stereotypes and organisational structures (Tilly, and Tilly 1998: 98-100; Tsoukas 2000: 39-40). Efficiency and quality objectives for managers in ambulance services are likely to lead managers to gain as much as possible in the way of economic resources for the areas under their jurisdiction, but also to try to minimise the amount of this money that must be dispersed down the chain to service delivery when resources are limited. This elementary understanding of some key manager's interests will suffice for understanding their involvement in ambulance volunteer identity work. This is not to ignore that managers, like volunteers, will be working to meet a complex array of interests that reflect and construct their personal and social identities.

Resources and status figured strongly in the volunteer identity work, not because these are the sole interests of volunteers and others but because these are the greatest areas of conflict. The effects of these conflicts are found in ambulance services in the problems of volunteer un-sustainability, under-resourcing, and conflicts with paid staff. So it is conflicts over interests that underlie volunteer troubles. While some conflicts over interests can be considered inevitable, it is the lack of collective volunteer agency that created imbalances that led to overt problems as volunteers exited ambulance services or were not able to promote their collective interests. These matters will be discussed further later in the chapter.

In summary, the combination of identity work and interests provides a useful explanatory framework for volunteering. Identity work and interests allow a more complex understanding of volunteer motivations and power. Motivations can be understood in a more holistic framework where they are part of the development and reinforcement of 'self' and personal identity and are not only part of a rational

means ends equation. Equally, collective interests such as altruism can be about genuine social connectivity or a desire to make a difference.

However, not all collective interests are of equal benefit for the delivery of ambulance services. The Moral Volunteer identity frame of helping is not as useful as the Professional Volunteer identity in a critical health care field, which is likely to be more helpful to local community members requiring an ambulance service, if it could be translated into a collective agency. However, the collective interests of volunteers, both moral and professional, did not translate into a collective agency in the ambulance services studied here.

### **The problems with ambulance volunteers' agency**

This study aimed *to explore volunteer agency through identity work in health services to inform a theory of volunteering*. The examination of volunteer identity work has shown that ambulance volunteers lack the capacity to deliver strategic collective changes in ambulance services. Ambulance volunteers have limited agency within ambulance services and this is linked to cultural and structural imbalances. An underlying cultural cause is the way that binary oppositions in discourse create an invisibility of volunteers within many areas of ambulance services. The volunteer troubles that arise from the limited volunteer agency are however, ultimately detrimental to both ambulance services and volunteers.

These findings challenge the underlying assumption that volunteering supports a pluralist form of power. The lack of ambulance volunteer collective agency supports the central premise of this thesis which is that neo-liberal and communitarian policies that foster service volunteering will not develop the type of active citizens that ensure a vibrant democracy and assist in the equitable distribution of resources without deeper cultural and structural change. Instead, they promote a local level of collective action that supports the status quo, and reinforces inequity.

## Service volunteers as primary agents

While broad social changes and local power struggles are evident within ambulance volunteer identity work, this study has shown that volunteers are limited in their ability to effect their collective interests. While pluralist and community participation theories construct volunteers as having collective agency, this study showed that while ambulance volunteers have collective interests, their level of agency is only at the level of an individual agent, not a collective. Archer's (2000) concept of 'Primary Agents' is useful here. Primary Agents are those who collectively belong to groups with similar life-chances, who as agents take up social identities and reflectively review and affect their own interests and concerns. But Primary Agents are powerless to strategically change existing cultural and structural conditions in order to improve their life chances or meet their collective interests (Archer 2000: 11). Such was the case with ambulance volunteers, who were unable to use the collective ambulance volunteer identities to influence or drive changes.

Ambulance volunteers were unable to collectively articulate new ideas and directions. They were constrained by the cultural stability of their identities and the organisational structures that reinforced their identity and limited avenues for a volunteer collective voice. This is how cultural and structural conditions create and maintain Primary Agents who lack both the fresh ideas and the structures to challenge the status quo (Archer 2000: 270-271). Such a categorisation of ambulance volunteers sets them apart from activist volunteers such as those in the arenas of environmental or human rights activists and suggests that volunteers should not be discussed as a homogenous group. Activist volunteers by definition are a collective focused on challenging elements of the status quo (Minkoff 2001). While no doubt they have their own barriers to success, they do have the ideas and organisational structures to attempt strategic level change, and are largely representative of the groups discussed under identity politics (Calhoun 1995; Minkoff 2001). Therefore in terms of collective agency, the interests volunteers bring to the collective action, the types of structure and the focus of collective action will have a significant impact on their capacity for Corporate Agency.

Ambulance volunteers were unable to effect their collective interests at several levels. They lacked the capacity to gain extra resources using the Professional Volunteer identity. As Primary Agents they positioned themselves in identity work to argue for resources, using comparison with paid staff, comparison between urban and rural, and by using a discourse of inequity. But until the SUBC survey (which will be discussed further later) there was no official or powerful avenue for this discourse to move beyond small local groups. Hence ambulance volunteers fit Archer's (2000) picture of Primary Agents stuck in a form of subordination where they are unable to collectively act for their interest. Instead they 'are restricted to the quiet cherishing of grievances or doubts, the lone rebelliousness of sacrilege, insubordination or withdrawal...' (Archer 2000: 271; see also Scott 1985).

Those with the power to strategically effect change at a collective level are called Corporate Agents (Archer 2000: 268), and in ambulance services, managers are the key Corporate Agents. Any cultural or structural changes can lead to changes in social and collective identities, so when collectivities are able to deliver strategic change to broad social identities, such as the ambulance volunteer identities, they can be considered as Corporate Agents.

This study found that there were managers introducing a new Staff Volunteer identity and driving changes to volunteer systems and policies. As volunteer troubles impacted on the ability of managers to ensure a sustainable workforce and service standards, the interests of volunteers and managers began to overlap. And so while it appeared that managers are meeting the interests of volunteers, they were primarily meeting their own interests. As Primary Agents, volunteers 'are distinguished from Corporate Agents at any time by lacking a say in structural or cultural modelling' (Archer 2000: 265). Instead, Primary Agents are 'dragged into the ideological fray, mobilised for the convenience of Corporate opponents and usually let down by them' (Archer 2000: 278). And so it is important that close attention is paid to the outcomes of changes that apparently address the interests of Primary Agents such as ambulance volunteers, because as this study found, changes may be superficial, unimplemented, or adapted during

implementation, to continue to meet the interests of more dominant Corporate Agents.

Examination of the impact of the Staff Volunteer identity on the status and local connectivity interests of ambulance volunteers provides an example of how changes may not meet the interests of volunteers. This study found that while some changes appear to be benefiting ambulance volunteers in terms of economic resources, there are other important interests for volunteers in terms of status and local connectivity that may be lost through the Staff Volunteer identity. The difficulties of incorporating altruism and its attendant status gains into a Staff Volunteer identity, along with the difficulty in linking with community participation discourses represent an inability of this identity to deliver status and connectivity interests to some volunteers. In its present form, there is little to tempt the ambulance volunteer to adopt the Staff Volunteer identity.

Another example of how identity changes can work in the interests of managers is the Self-interested Volunteer identity. The Self-interested Volunteer identity can work for 'traditional managers' by slowing a shift away from the Moral Volunteer, as it offends the very sense of altruism that so strongly defines Moral Volunteers. As our strongly Moral Volunteer Carmen stated about claiming reimbursements "We don't do that"! As Self-interested Volunteers are represented as greedy and not altruistic, Moral Volunteers may work to position themselves as 'other' to this identity by continuing to demonstrate strong altruism.

Control by ambulance service managers of two key identity processes, representation and collective voice, work against the interests of volunteers and for the interests of managers. These two processes control the volunteer identity work in ambulance services and help to explain why volunteers are only able to meet their more personal interests through identity work and not effect larger social representations. The localness of volunteers' interests and identity is a barrier to volunteers forming a broader collective identity with strategic collective goals. The lack of collective agency of volunteers allows managers to promote identity work changes to meet their interests, and these interests have overlapped with volunteer concerns in some key areas. It is the power of managers to effect

change through ambulance volunteer identity work that is a key finding of this study.

## Morphogenesis – time and synergy

The control of ambulance volunteer identity formation happens over time and involves the influences of broader societal discourses. The influences of managerial discourses while evident in ambulance volunteer identity work were only quite recently impacting on volunteer identity. Others have noted the importance of time in discursive change: where ‘it transforms values and becomes visible and effective only through maturation over time’ (Bleiker 2003: 41). Time is an important element of the critical realist approach, because of the way it theorises the interplay between culture, structure and agency, giving culture and structure emergent properties that exist prior to agency (Archer 2000: 22; Mellor 2004: 108). With this understanding, time is an important element in how volunteers increasingly take on aspects of new identity frameworks based on the power of managers to represent and characterise volunteers. But this study highlights that a synergy of events are involved in the length of time involved in change, because changes to cultural or structural elements requires the trigger of a synergy of events.

This synergy and timing is similar to the policy window described by Kingdon (2002), a window which opens when problems, proposals and politics come together. In this case it was problems highlighted by the SUBC survey, solutions proposed by new Corporate Agents, and new policy discourses that came together. It took the introduction of ‘new managers’ as a challenge to the Corporate Agency of the traditional managers, plus the crisis of volunteer workforce sustainability, and the SUBC report containing a collective voice about volunteer issues to provide both the new ideas and the new structures to generate a morphogenesis towards the Staff Volunteer identity.

The introduction to Nearly Modern and Modern ambulance organisations of ‘new managers’ created a small group of managers who were trying to establish their own Corporate Agency in the face of a fairly traditional service environment. ‘New managers’ were more likely to have received academic level management



training and to have experience in organisations outside of the ambulance services. These differences set them apart from other managers with different knowledge and different identities. The anonymous SUBC survey responses contributed to the morphogenesis of volunteer identities by highlighting volunteer troubles. The SUBC results created a discourse of collective volunteer issues that in hand with sustainability discourses disturbed the morphostasis of the Moral and Professional Volunteer identities. The crisis with volunteer numbers in hand with the new ideas of volunteer troubles created a window of opportunity for 'new managers' to establish themselves as Corporate Agents, as they were able to introduce newer management approaches and ideas.

A brief review of the trajectory of change in volunteer identity work found in this study is able to highlight how ambulance managers are themselves affected by broader societal governance discourses over time. This broadens the issue of control of volunteer identity beyond managers to government and other knowledge generating elites such as academics. As Foucault (1980) demonstrated, knowledge and power are intimately linked and thus government policies such as managerialism, and concepts such as citizen responsibility begin to influence our social and cultural world. The morphogenesis of ambulance volunteer identities and the links to manager interests shows how control by more powerful elites influences volunteer identity work.

The congruence of these three elements explains the move from a situation of volunteer identity morphostasis towards a morphogenesis of volunteer identity in ambulance services. By understanding how managers influence volunteer identity work events occurring prior to this study are able to be theorized and the effect of time on changes analysed. The following discussion on Professional and Moral Volunteer identity changes are therefore assumptions based on the evidence provided by current changes occurring around the Staff Volunteer identity.

The Professional and Moral Volunteer identities are longer standing and are likely to have been in a situation of morphostatis for some time. The visibility of the Professional Volunteer within 'Traditionals' suggests that this is the oldest ambulance volunteer identity; likely to have been prevalent in some form at the

end of the 19<sup>th</sup> Century. In some respects this may seem surprising, as initially it seemed most likely that the Moral Volunteer was the oldest identity, carrying over from the 19<sup>th</sup> Century charity volunteer. However, governmentlists (Dean 1999: 129; Donzelot 1991: 57; Rose 1999: 123) suggest that when 'the social' emerged as a field for government in the 19<sup>th</sup> Century there were two approaches to government: using a moral imperative through charitable organisations, or a more professional scientific expertise through other agencies. The emergency service and militaristic origins of ambulance services, in hand with their development from local 'self-help' groups can be used to explain why ambulance services would have sat within the scientific approach more than a moral, charity approach in the 19<sup>th</sup> Century. The Professional Volunteer identity can be considered almost a 'hangover' from a time when ambulance volunteers were local groups focused on gaining first-aid expertise to provide services as local groups.

'Traditionals' have therefore retained a strong focus on the Professional Volunteer representation. Managers within 'Traditionals' have had less managerial control exerted through government funding and management, with less pressure generated from discourses about accountability and risk management than experienced by other services (Harris 2001). With a slower adoption of managerial discourses and retained associational structures, 'Traditionals' have had less exposure to centralisation and bureaucratisation pressures. This slower adoption of new managerial discourses would also explain why discourses of local self-help remained in 'Traditionals', leading to rural towns needing to raise funds to build ambulance stations and buy ambulances.

For services that have moved along the 'Traditional/Modern' continuum though, tensions and paradoxes between volunteers and standards are likely to have arisen by the 1980s and 1990s. These tensions represented challenges that were initially met by increasing the use of a Moral Volunteer identity. An increasingly centralized and risk averse management is likely to have worked to hide the tensions inherent in modestly trained volunteers being represented as professionals. With the increasing professionalisation of paid ambulance workers, the assertion that volunteers are professionals would have been harder to sustain. This tension is likely to have been compounded by the number of similarly trained

‘ambulance officers’ working in management, causing a point of conflict between volunteers and paid staff. Some ambulance services have experienced tensions from paid ambulance officers in the 1980s and 1990s around the use of volunteer labour in services (O'Meara 2002: 175). These accountability and industrial pressures are likely to have caused a suppression of the public representation of the Professional Volunteer identity, with instead a focus on the Moral Volunteer identity.

The Moral Volunteer identity was sustained in services that were centralized and bureaucratized, but still relied on promoted ambulance officers as managers. In this sense management discourses were not modernized, but a centralized control was applied to rural volunteer stations. The Moral Volunteer became the major representation of ambulance volunteers, drawing on the community participation discourses that began to flourish in the 1980s (Darcy 1999: 15; Everingham 1995: 26-28). The goodwill and altruism of rural volunteers could be promoted with less tension over accountability for standards or conflict with paid staff than that generated by the Professional Volunteer identity. The centralized control allowed the Professional Volunteer identity to be used internally within services by management to frame training and roster responsibilities for volunteers, without accompanying public status recognition. Public representations were instead linked to the Moral Volunteer. Through this shift in discourse volunteers were moved from being represented within the scientific area of the government of populations to the moral charity field described by both Donzelot (1991) and Rose (1999).

More recent shifts towards Volunteer Staff identities are due to the introduction of new managerial discourses through ‘new managers’. As ‘new managers’ struggled to combine a Moral Volunteer identity with ideals of good human resource practices and policies, and meeting legislative obligations towards employees they generated a new Staff Volunteer identity. The Staff Volunteer identity provided a framework for incorporating volunteers within service policies and standards, and allowed managers to meet concerns for good practices. As discussed, the ability of ‘new managers’ to effect change is largely due to a confluence of events, because

as managers struggled with increasing difficulties in ensuring adequate numbers of volunteers, traditional managers were looking for solutions to volunteer troubles.

The need for a congruence of events for morphogenesis explains the time-lag evident between broad government policies of managerialism and changes to volunteer identity work. Ambulance services themselves have only recently employed managers with newer managerial discourses and identities, and their ability to effect change also requires time and supporting societal changes. The prevalence of different representations of ambulance identities depending on the placing of the ambulance service on the continuum of 'Traditionals' to 'Moderns', support the premise that changing managerial discourses are directly related to the morphogenesis of ambulance identity. According to Archer (2000: 274) the lack of new ideas is a major impediment for groups wanting to move to a stronger collective agency, a cultural deficit that is obviously in the interests of existing elites. New ideas were brought to bear on the ambulance volunteer troubles through both the SUBC project and broader orders of discourse that promoted citizen responsibility, managerialism, and accountability.

In this way the transformation of thinking about volunteering in the present early 21<sup>st</sup> Century has influenced policies and practices in a way that has major implications for volunteers at an organisational level. The cultural impact of dominant knowledge along with more practical effects from government funding and policies are filtered down to an organisational level. Other studies have reflected on how government practices influence cultural ideas of citizenship. Governmentalist scholars have argued that successful 'responsibilization' of voluntary agencies for both the provision of social services and the training of 'community members to assume their moral duties' (Ilcan, and Basok 2004: 129) is the result of Canadian style neo-liberal policies. The policies they describe are part of the broader move towards government through community described by governmentlists (Morison 2000; Rose 1999).

The recent move to introduce community partnership discourses in rural ambulance services fits within this description of a broad government project of community government. The community partnership discourses were used by

ambulance managers to fill a 'community responsibility' gap left by the move from Moral and Professional Volunteer identities to the Staff Volunteer identity. These shifts in discourse mean that volunteers are represented as community members who are providing a necessary and 'taken for granted' responsible form of citizen reciprocity. To understand the full impact of this shift in identity requires further consideration of the structural and cultural context of the volunteer environment. This will be further considered later in the chapter.

While managers might be responsible for control of volunteer identity, it needs to be reinforced that volunteers are not totally powerless or subservient to the control of a dominant elite. Instead because power is understood as contextual and negotiated (Marsden 2005: 155) volunteers are engaged in the processes of ambulance volunteer identity work. However, because volunteers are Primary Agents their main form of agency is in taking up or discarding an identity. This means that within their life situation they choose to take up the ambulance volunteer identity and as this study found, ambulance volunteers have not taken up the Staff Volunteer identity. However, because of the power of managers to influence the identification of volunteers there are reasons to believe that it is only a matter of time before volunteers begin to take up the Staff Volunteer identity.

### Identity reflected in volunteer recruitment

The relationship between power and knowledge has more micro level influences at the level of volunteer recruitment and retention. The cultural changes involved in moving towards a Staff Volunteer identity will alter over time the volunteer characteristics that are emphasised and which place volunteers within a different organisational space. This space is the 'place for the subject...from which its particular knowledge and meaning most make sense' (Hall 2001a: 80). Volunteers are moved into the space of ambulance services, instead of the community space that Moral and Professional Volunteer identities occupy. If this morphogenesis is completed it will create new framing characteristics for volunteers as they become increasingly recognised as members of the ambulance workforce covered by policies and increasing surveillance. While these changes will provide some benefits to volunteers interests it will be at the expense of status as they are also

characterised as the lowest members of the staff hierarchy and their altruism becomes hidden by a discourse of reciprocity.

The control of formation of ambulance volunteer identities by managers gives them some control over the make-up of the volunteer workforce over time. The morphogenesis of ambulance volunteer identities raises questions about the individuals that may be attracted to ambulance volunteering in the future. While this study showed that professionalisation and managerialism within ambulance services had not caused volunteers to lose focus on collective interests, the theoretical framework provides an explanation of how this might occur in the future. As ambulance managers influence volunteer identities, over time individuals with different interests will be attracted to the ambulance services.

This is an important consideration at the interface between ambulance services and volunteers because it is possible that the concern for collective interests could be lost to services through the poor application of managerial and professional principles. As already discussed this may have already occurred in the organisations within Milligan and Fyfe's study (2005) where they found a loss of localness.

Control over ambulance volunteer identity formation occurs through the power to characterise, represent and position volunteers in discourse. Statistics and those who collect and analyse them are in fact 'part of the technology of power in a modern state' (Hacking 1991: 181). While Foucault showed that control both needs and forms knowledge (Marsden 2005: 154), such an understanding should not be synonymous with a resistance to developing increasing knowledge of volunteers. This study has shown that inadequate information about the volunteer workforce helped to maintain a form of volunteer invisibility which worked against the interests of volunteers. The gathering of information about volunteers through the SUBC survey assisted in improving conditions for volunteers. Such findings seem to be apposite to Foucault's (1991a) ideas of surveillance where increasing knowledge is used to control and shape the behaviour of populations. However, while knowledge can be used to control, equally it is needed to allow the development of collective identity, collective interests and collective agency.

The important focus therefore is who controls information and the purpose for which it is gathered and used.

The invisibility of volunteers' collective concerns, volunteer economic costs and volunteer demographics, mirrors the economic invisibility of voluntary efforts within the Gross National Product (Ironmonger 2000), the invisibility of women's' informal contributions to productivity (Waring 1988) and the invisibility of informal volunteers through categorisation (Kerr, and Tedmanson 2003). In an era where so much of society is based on information, invisibility is a form of powerlessness and an indication of marginalisation. However, the problem is not simply repaired by the collection of information, as control over categorisation and representation means that information will be used to maintain the interests of more dominant groups wherever possible.

The managerial control over the representation of ambulance volunteers highlights a weakness in the primary agency of volunteers at the point where they choose to join an organisation. Volunteer's commit to volunteer service because the volunteer identity *represents* an opportunity for them to meet prioritized interests within their particular life situation. However, the individual can only base their judgment on dominant and publicly available representations of the particular volunteer role they have chosen, such as an ambulance volunteer. So therefore, while the individual may see an opportunity to meet certain interests through taking up the ambulance volunteer role and identity<sup>38</sup> the role may not prove to enable them to meet their particular interests.

What happens within the volunteer experience also becomes extremely important to the continued involvement of the volunteer. The volunteer experience may prove to meet the interests of the volunteer with a resultant happy balance until such a time as the individual's situation changes, interests are re-prioritised, or

<sup>38</sup> Note that role and identity are not the same, though Archer Archer, M. S. 2000. *Being Human: the problem of agency*. Cambridge: Cambridge University Press. has a tendency to conflate the two.

interests fail to be met. Or the volunteer experience may prove to not meet the volunteer interests, at which point the individual may exit the organisation, or may discover other interests which are prioritized and the individual may continue to volunteer. Any mismatch between public representations of volunteer identity and reality may be evident in a quick turnover of volunteers within organisations.

Changes to dominant public representations of volunteers will over time work to change the composition of the volunteer workforce. Promoting volunteers as ‘good citizens’, as ‘agents of change’, as ‘staff’ create new representations of volunteers which will attract individuals with different prioritized interests to the services. In a similar manner, governments can also over time influence who contributes as an ambulance volunteer. If policies and discourses create shifts in general societal values to the degree where collective concerns fade as a normative value and more individualist commitments come to the fore then there may be a dwindling pool of collectively focused volunteers from which ambulance services can recruit, and a growing pool of individually interested volunteers. Governments can also influence social conditions to the point where individuals need to re-evaluate their priorities to focus on matters other than collective interests, say for example earning an income if economic conditions deteriorate.

Within this explanatory framework, critics of neo-liberal policies (See for example Pusey 2000) can find some support as volunteers with collective interests begin to be understood within a cultural and structural context that contains life-chances and interests. Weisbrod’s (1988) supply side arguments about the volunteer workforce responding to tax conditions makes sense within a framework of interests and identity as do the macro studies of Salamon and others (Salamon 1987; Salamon, and Anheier 1993, 1994; Salamon, and Sokolowski 2001; Salamon et al. 2000). Governments do influence volunteering at both a macro cultural and structural level, and these macro level influences interplay with more micro level organisational and social level cultural and structural events. Therefore volunteers’ personal and collective interests must be understood as being influenced by dominant discourses and socio-economic



conditions, and volunteer agency must be seen as conditional to both macro and micro cultural and structural conditions.

Such an understanding also fits with the literature that links volunteering with life stages (Knoke, and Thompson 1977), with goals and outcomes (Tschirhart et al. 2001), and with shifts in motivation over time towards more organisationally focused goals (Pearce 1993). But it also supports Wilson and Musick's (1999) findings that it was unsuitable to make broad generalizations from cross-sectional data as results were dependent on the type of volunteering and the volunteer. Because each individual is meeting interests that are based on their own life chances and interests and because representations of volunteer roles may not match volunteer experiences, broad generalizations can only ever reflect broad trends in the socio-cultural environment.

The morphogenesis of ambulance volunteer identities towards a Staff Volunteer identity shows ambulance volunteers are being carried along as 'Primary Agents' for the benefit of the 'new manager' Corporate Agents'. This situation is supported by socio-structural conditions which support managers in a position of power and limit the collective agency of volunteers. Without structural and cultural changes that provide volunteers with a collective voice they will remain as Primary Agents and managers will be able to selectively promote or block innovations to achieve their own interests in the manner suggested by (Alvesson, and Willmott 2003: 12). A closer examination of the underlying causes of the Primary Agency of ambulance volunteers is therefore required to understand how the situation may be improved.

## **The reality of the interface between ambulance volunteers and ambulance services – a theory**

This study has explored the ambulance-volunteer interface in order to understand how volunteer troubles and volunteer agency interact. Following critical realists (Archer 1995, 2000; Bhaskar 1975) this study considers empirical data as a conceptual expression of phenomena which are generated by the interplay between culture, structure and agency. This thesis on the ambulance-volunteer

interface involves the 'retroduction from manifest phenomena to generative structures' (Marsden 2005: 135). The result of this 'retroduction' is a theory of the causal interplay between a lack of volunteer collective agency and cultural and structural conditions that support inequity for ambulance volunteers and the populations they serve.

This study found societal, sectoral and organisational conditions preventing ambulance volunteers from attaining a collective agency and sustaining a situation of inequity for the volunteer workforce and the populations they serve. Put simply, the moral and local community characterisation of volunteers is a cultural generative condition that fosters and supports structural conditions of inequity. The organisational structures that limit volunteer collective voice are structural generative conditions that support and interplay with cultural conditions of identity. But a deeper underlying generative mechanism is the division between rural and urban populations that create societal level conditions that limit ambulance volunteer collective agency and normalise difference. Because volunteers lack the ability to strategically effect their interests, they work under conditions of inequality with negative implications for the value of policies that promote devolution of services to local volunteers.

Critical realism gives balanced emphasis to agents, cultures and structures in analysis and theory (Archer 2000; Bhaskar 1975; Marsden 2005). 'The combined actions of individuals (or social practice) are objectified in social structures: a *sui generis* reality both the medium within which social practice occurs, constraining and enabling, and the outcome of that practice' (Marsden 2005: 136). This section therefore turns to focus on the interplay between the social cultures and structures that create the stratified life chances of ambulance volunteers and volunteer agency and practices.

### A theory of culturally and structurally embedded inequity for ambulance volunteers

The following outlines the key premises of this thesis: how a lack of collective agency creates inequity by limiting volunteers' ability to negotiate economic interests, and in-turn how the marginalized socio-economic position of volunteers

contributes to their inability to generate collective agency. The prioritized interests that volunteers and others bring to this situation, which are found in the key ambulance volunteer identities, both reflect and construct the socio-economic situations of ambulance volunteers. Such a causal interplay between agency, culture and structure is pivotal to a realist perspective of events, where neither agents nor structures are accorded sole power, but instead constantly interact (Archer 2000: 310-311).

Culturally, conditions that generate an ambulance volunteer inequity and limit the collective agency of volunteers hinge on the boundaries created by the discursive grouping of ambulance volunteers into categories of moral volunteers and rural communities. The binary oppositions between volunteer/paid staff and rural/urban are generative structures in the real world of ambulance volunteers because they create a concept of difference that affects the relations between rural/urban and volunteer/paid. This conceptual difference also helps form the interests that volunteers meet through ambulance volunteer identities, which in turn reinforces inequity. The manifestation of the binary opposition can be explained as follows:

- Rural volunteers frequently come from smaller and more remote population centres, which increases the importance and visibility of networks, and decreases employment opportunities. This generates effects on interests.
- Moral and Professional Volunteer identities reflect the key networking, status, resource, local collective, career and local social capital interests of volunteers.
- However, Moral Volunteers are positioned within a community framework, and Professional Volunteers are positioned within a rural community framework, both of which create a 'limited field view' that excludes volunteers from economic spheres.
- The power of the limited field view arises from the power of binary categorisation to affect the way people think and talk.

- Culturally embedded characteristics of volunteer altruism and frugality generate
- A rural/urban dualism sets rural populations apart from
- structural effects within services and are actively used to limit service costs at the expense of volunteers and the populations they serve. In this way there is an element of exploitation around ambulance volunteer involvement in services.
- urban populations and normalises a lower level of service for rural populations.

The economic invisibility of the Moral Volunteer in hand with the rural identification of the volunteer workforce also creates a structural under-resourcing of volunteers. This under-resourcing involves poor human resource management and ‘last in-line’ budget allocations which creates a low standard of support for volunteers. The generative effects of binary oppositions also translate into structural phenomena as they become embedded into the systems and procedures of ambulance services.

- Management structures that placed volunteers outside budget planning and outside

The key structural phenomena that created structural barriers to volunteer collective responsibility and procedures, structural barriers to volunteer collective responsibilities that attach to other members of the service workforce, and could ignore or ‘not see’ the costs of volunteers within the services. As well, ambulance services could take less agency, and generated inequitable treatment for volunteers derive from the more dominant Moral Visibility for volunteer workers and rural services.

- Lack of information about volunteers allowed an aggregating and homogenising of volunteer statistics that maintained a structural resource inequity and hid individual volunteer problems.
- 

- Communication systems within ambulance systems are inadequate for allowing volunteers to represent their collective concerns.

This

allows managerial elites to control discussions of volunteer interests and maintain existing inequalities. Structural barriers feedback into the maintenance of the cultural phenomenon where the characteristics of the Moral Volunteer identity of altruism, frugality and making-do become inculcated into the Moral Volunteer ethos.

The volunteers as Primary Agents may complain locally about their situation or exit the service, but are not able to strategically effect change.

The phenomena described here form the ‘actual’ level of reality described by Bhaskar (1975: 190), a subset of the real generative networks of structures. The underlying cultural generative mechanism that has been retroduced by this analysis is that of binary oppositions separating volunteer and rural collectives from urban and paid collectives. Thus the real cultural events in this case that cause volunteer troubles are the groupings that set ambulance volunteers and the populations they serve apart from urban and paid ambulance services.

### Real generative structure –the otherness of volunteer and rural collective identities

The findings of this study show that being identified as both ‘volunteer’ and ‘rural’ *create* and *reflect* a double marginalisation for ambulance volunteers. So the objectifying of volunteers and rural populations as ‘other’ found within ambulance services is a key generative mechanism for events and organisational structures that create and reinforce a marginalised ambulance volunteer workforce. Causality is not simply a matter of A causes B, but instead the interplay between A and B. So a rural identification becomes a real structural barrier for ambulance volunteers, but equally the rural social networks and structures create the stratified world that fashion volunteers’ interests.

The marginalising effects of ‘otherness’ have been found by others in studies of groups that differ by sex, colour and location (See for example Cloke, and Little 1997b; Hall 2001b; Philo 1997). In the collection of work *Contested Countryside*

*Cultures: otherness marginalization and rurality* (Cloke, and Little 1997b) several authors considered ‘how rural itself can foster a particular identity’ and the taken for granted nature of the rural concept (Cloke, and Little 1997a: 279). In this study, ‘otherness’ allows the volunteer workforce to become hidden within a rural/urban categorisation and when the volunteer economic weakness is actualised into an organisational structure it sets rural services apart to receive fewer resources than urban services.

The critical realist acknowledgement of a stratified world allows incorporation of insights from social stratification theorists. Using a critical realist approach scholars are able to blend the work of structural theorists such as Bourdieu with critical realism (See for example Vandenberghe 2000). Scholars have long focused on explaining how power determines the distribution of resources within a society (Lenski 1966: 44-46) and can therefore provide useful insights for this study. The value of this thesis rests in its ability to shed fresh light on existing knowledge, and two key areas of previous research have relevance here: the ideas of a voluntary secondary workforce (Baldock 1990) and the concept of an urban bias (Lipton 1977).

The inability of volunteers to affect collective interests under the Moral and Professional Volunteer identities supports Baldock’s (1990: 133) assertion that service volunteers make up a second-class volunteer workforce. Labor market inequalities have traditionally been analysed by class or sex, and secondary workers are found to have low autonomy, high health risks, and generally poorer conditions (Kolberg, and Kolstad 1993; Peck 2000). This study places volunteer workers in such a secondary category. While Baldock (1990: 128) relates the marginalisation of Australian welfare volunteers to the sexual division of labour, this study finds that it is the volunteer and rural identification that underlies the weak collective position of ambulance volunteers. This finding supports Peck’s (2000: 231) claim that a secondary workforce exists because of the ‘*prior* existence of a group of workers who can be exploited in this way’. In the case of ambulance volunteers it is their rurality which leads to local concerns and limited employment options that are likely to underlie their susceptibility to exploitation. This identifies geographical location as the underlying causal mechanism in the

treatment of volunteers as a secondary workforce. Geography as a cause of labour market segmentation has been a blind spot of segmentation theorists (Peck 2000: 239) but in this study a rural location is causal to labour market segmentation.

The invisibility of the volunteer workforce within ambulance services also reflects the findings of the review of volunteer literature where few volunteer studies adopt a workforce framework (See for exceptions Pearce 1993; Taylor 2004). This mirroring of micro and macro conditions again shows how broad social influences such as academic discursive frameworks and political structural frameworks will also be found within the more micro level organisational cultural and structural conditions. The influences of macro conditions suggests that the increasing interest in economically measuring volunteers (Australian Bureau of Statistics 2000) and in managing volunteers (Commonwealth of Australia, and Volunteering Australia 2003) will in the future influence the organisational perspective of volunteers as workers.

Pearce (1993: 165) suggests that volunteer non-payment is a symbolic barrier for volunteers within organisations because pay levels reflect status. This thesis though argues that non-payment is implicated in deeper cultural and structural problems because it creates an economic invisibility. This is not to suggest that correcting the volunteer inequity requires that volunteers be paid, but instead that service organisations employing volunteers need methods that can create an economic visibility for volunteers. This may not be an easy task as Feminist experiences suggest that creating an economic visibility for volunteers in order to improve their collective agency may meet with powerful if subtle opposition. Alternative measuring systems to account for women's unpaid work were promoted in the 1980s, but efforts to mainstream such work was effectively marginalised or ignored by powerful interests even at the level of the United Nations (Waring 1988: 247-250). While it is beyond the scope of this thesis to propose how volunteers can be made economically visible, the thesis does open the discursive space for new solutions.

The lack of a collective voice for volunteers was a further key factor in their workforce marginalization and in limiting the collective agency of volunteers. The



interplay between volunteer local interests, managerial interests, and cultural and structural conditions prevent volunteers from developing a stronger collective voice. The study findings show that it is not a simple matter of managers controlling and limiting volunteer voice, but that the localness of volunteer interests, and the focus on helping and service, contribute to lack of volunteer voice.

As the preceding discussions on volunteer interests and agency have argued, representations of volunteers over time create the composition of the ambulance volunteer workforce in terms of attracting individuals with certain interests. The Moral and Professional Volunteer identities attract volunteers with some prioritised interests around local helping and local service provision. It does not attract individuals with interests in advocacy for social justice in the health care provision for local communities. As others have shown an increased focus on service provision by voluntary agencies limits their capacity to advocate for social justice and marginalised groups (Arai 2000; Ilcan, and Basok 2004). The tensions between service and advocacy need to be included in any consideration of volunteers' collective agency and the role of volunteer identity.

While the lack of collective volunteer agency has resulted in current volunteer troubles for both volunteers and managers, volunteers do have the ultimate safety valve of exiting the organisation. However, without collective agency a volunteer workforce composed of 'forced or coerced' volunteers could be significantly at risk of poor treatment, and the populations served by such volunteers would also be at risk of inadequate services. These implications raise concerns when extended to recent policy directions of mutual obligation and community service.(McClure 2000; Warburton, and MacDonald 2002; Warburton, and Smith 2003). Coerced forms of volunteering have already raised concerns as NGOs feel pressured by the need to take-on coerced volunteers (Cockram 2003) and such coercion has a negative impact on the identity of active citizens (Warburton, and MacDonald 2002; Warburton, and Smith 2003). If volunteers do not have the agency to exit volunteer service work, and others are able to marginalise volunteer interests then there is little option for the volunteer worker to achieve redress of problems. Over time, the impact of coercion on volunteer identity may see a

change in the make-up of the volunteer service workforce to include more coerced individuals and less voluntary volunteers and an even more powerless secondary workforce.

Equally, less obvious examples of coercion should be carefully considered by policy makers. The impacts of ‘social obligation’, and ‘community need’ may find rural volunteers with less choice in volunteer work than their urban counterparts (Flick et al. 2002; Kerr, and Tedmanson 2003). As broader social conditions influence, and are reflected in, organisational structures then broader inequities will be found within rural identity work.

Health service inequity in rural areas has been noted by others (Baum, and Sanders 1995; Larson 2002; Wakerman, and Lenthall 2002) but this thesis argues that a rural/urban bias is a key generative structural factor in rural ambulance service inequity. Lipton (1977) developed a thesis of ‘urban bias’ where he argued that poor rural populations within the developing world were sustained by an urban power elite. He argued that the rural populations were enriched more slowly than urban populations because of an urban-rural balance of power brought about by a political centralisation that allowed capture of ‘allocative decisions’ (Lipton 1977: 60-61). This urban bias can be considered a form of government failure, where governments will only supply services to a level that satisfies the average voter, leaving gaps in services (Dollery, and Wallis 2001).

There are several ways that urban populations can be considered a more powerful elite than rural populations in relation to ambulance services: with their greater voting (and therefore political) power; greater managerial power with the location of ambulance service headquarters in metropolitan areas and the positioning of most high level management there; and a cultural power base because new knowledge mostly originates from metropolitan based universities and newspapers. These urban-centric factors mean that it is largely in the interests of those in control of ambulance services, from governments, thru managers, to academics, to support the resourcing of urban services above rural areas. A range of political, managerial and cultural elites will be able to influence the cultural and structural environment of rural populations.

Geographical distance and sparse populations are the basic structural factors that underlie the inability of rural populations to meet their collective interests and rural ambulance service needs (beyond the local). Geographical distance and sparse populations make it difficult for rural groups to organize and work collectively. A rural location contributes to a form of invisibility as face to face communications are more difficult and inadequate communication infrastructure increases the problem. Rural individuals are therefore more likely to be Primary Agents.

This study suggests that recent approaches to service delivery models may actually continue to support a rural inequity. Firstly, normalizing ideas of rural town members as a 'community' frames rural to be synonymous with groups with needs, but also as the site for meeting needs (Everingham 1995; McDonald, and Marston 2002). In neo-liberal community discourses, community action is promoted over government action (McDonald, and Marston 2002). Rural population are therefore understood as needing to improvise and able to make do because of geographical distances, sparse populations and community good-will. This taken for granted understanding of rural areas limits the possible solutions that can be 'thought' about rural ambulance service provision. The underlying power imbalance between rural and urban populations means that ambulance resource difficulties are unlikely to be resolved through a solution that disadvantages urban to assist rural.

The recent discourses of community responsibility (Adams, and Hess 2001; Lacey, and Ilcan 2006) are drawn in to support this rural/urban bias. Communities of need are framed as being required to be equal partners in meeting their needs. In this way support from rural communities becomes a requirement of receiving ambulance service, and a circular logic foregrounds the community and backgrounds the organisation in terms of responsibility for an essential service. There is a risk that rural communities will only receive an ambulance service that matches their capacity to contribute, which will in turn disadvantage lower socioeconomic populations which are likely to be most in need of ambulance services (AIHW 2005). Such thinking provides a 'rationale through which failure is able to be attributed to poor playing, rather than the nature of the game itself' (Thomson

2005: 746). By representing rural ambulance services and volunteers within a framework of community reciprocity, inadequate services can be blamed on the community, and responsibility for services stays with rural areas.

The normalizing of the community participation discourse also deflects questioning about why the nature of rural services should be so different to urban services.

Because urban elites are able to control rural cultural and structural phenomena, the focus of rural issues, debates about minimal standards of health care for rural areas, social equity, and the costs of funding volunteer services are avoided. These economic and equity issues can remain hidden because representation practices keep volunteer services within a social field of discourse and outside economic field issues. It is not that the concepts of community engagement and partnership are themselves inequitable or unworkable (Morison 2000; Wiseman 2006), but that existing social structures allow them to be framed and delivered in a manner that supports inequity (McDonald, and Marston 2002). What are missing from the ambulance community partnership discourses are discussions about equity and minimal standards, and acknowledgement of the effect of power imbalances that exist between urban and rural populations. Rural communities do not enter partnerships with ambulance services on an equal footing.

This thesis suggests that neo-liberal and communitarian policies that devolve services to local volunteer groups may compound rural service inequality as both volunteer workforce and rural populations lack the agency and resources to meet collective interests. This problem will be exacerbated as the increased focus on service provision by voluntary agencies limits their capacity to advocate for social justice in rural areas (Arai 2000; Ilcan, and Basok 2004). Volunteers as a policy solution, misrecognises the agency of service volunteers because they are closer to the cheap secondary workforce identified by Baldock (1990) than the powerful agentic groups of social movements. Perhaps more importantly service volunteers as policy solutions will not be able to redirect social resources and support a more equitable society unless services develop new ways of interfacing with a volunteer workforce.

## Conclusion

This thesis has demonstrated the utility of identity work as a framework for understanding volunteers. Using this approach the diversity of ambulance volunteer interests has been explored and the local collective interests of ambulance volunteers uncovered. By taking a broad definition of interests the interplay between personal and collective identities reflected in identity work situates ambulance volunteers within a socio-cultural context that includes broad social discourses.

However, the lack of collective agency of ambulance volunteers and their inability to effect their collective interests has also been a finding of the study. Archer's (2000) concepts of Primary and Corporate Agents was useful for understanding how local collective action does not necessarily equate to the ability to effect collective interests. Foucauldian governmentality insights on control of identity formation shed light on how ambulance managers and other power elites can influence ambulance volunteer identities. This influence over time can change the subjectification of volunteers thereby changing the ability of volunteers to meet their interests, and changing the demographic make-up of the ambulance volunteer workforce. The link between interests and volunteer identity means that any broad social change can affect the prioritising of interests that leads individuals to commit to a volunteer role.

This thesis takes as its central premise, the ontology of critical realism, which argues there is a real world with real social structures that cause events. Causality needs to be retrodeduced from observable events. The real causative structures found within this study were the 'othering' of volunteer and rural collectives in order to advantage urban and managerial interests. The defining of these groups as different causes real issues of inequity for rural volunteers and rural populations. But the inequity is hidden because the interests of volunteers are in turn defined within a sense of difference. The interplay between volunteer troubles and lack of volunteer collective agency is the result of an 'othering' of volunteers and rural populations.

These findings suggest several problems with current policies that see volunteers as solutions to societal problems. While there is some support from this study for neo-liberal beliefs that citizens will fill service gaps left by governments and markets, the underpinning assumptions that it is rational thinking volunteers who will fill gaps is found to be incorrect. Because neo-liberal policies rest on assumptions that individuals will only provide voluntary services that meet rational and self-focused interests, discussions of inequity and coercion are excluded. Yet this study of ambulance volunteer identity work shows that a multitude of potential interests can underlie voluntary service, and that sociocultural conditions influence how these interests are prioritised. Interests need not be either rational or self-interested; they may instead be emotional and collective. There is also a larger question suggested by this thesis which is ‘does voluntary service provision support a broader inequitable social service provision?’ The following chapter will consider further the implications of the study findings.

## Chapter Eight: The Future of Service Volunteering

*If you knew when you began a book what you would say at the end, do you think that you would have the courage to write it?* (Foucault 1988b: 9)

### Summary of thesis

The purpose of this critical study was to *explore volunteer agency through identity work in health services, to inform a theory of volunteering.*

This thesis is significant because it applies a critical realist theoretical framework to the study of service volunteers that has not been used previously in volunteer research. Studies of the causal powers of identity on structure and social expectations are recent sociological works (See for example Archer 2000; Rose 1999) and this study is situated within this recent sociological movement.

As Foucault's opening quote suggests, the research process is a process of development of both skills and ideas and is therefore by nature a reflective and iterative process that sees the researcher revising ideas and theories as understanding about the topic grows. This study followed an emergent process that allowed design flexibility in the selection of texts as my understanding of the phenomena developed (Patton 2002: 254-255). The analyses are based on carefully selected texts, sound methodology and a tested method of discourse analysis. The triangulation of texts from various sources (speeches, documents, survey comments, and interviews) increased the validity of the findings and supported the explanatory discussion that followed.

The previous three chapters have answered the research questions, and the answers will be briefly summarised here.

### **What are the key organisational identities that apply to Australian and New Zealand ambulance volunteers and what are their key features?**

Four key volunteer identities are used in the ambulance services studied: the Moral Volunteer, the Professional Volunteer, the Staff Volunteer and the Self

interested Volunteer identities. The Moral Volunteer identity was the dominant identity, and along with the Professional Volunteer identity, long standing. The two other identities were more recent and reflected identity work that attempted to deal with changing conditions. The key features of the identities are described in Chapter Five and a summary table presented on page 178. The most important elements of the identities for examining volunteer agency were the volunteer interests that were reflected in the identities, the positioning of the identities in relation to ambulance services, and the strength of the identities in the ambulance services. These elements allowed an assessment of volunteer agency in ambulance services.

### **What evidence of volunteer agency emerges from volunteer identity work within Australian and New Zealand ambulance services?**

The study findings that demonstrate a lack of volunteer collective agency have been discussed at length throughout the final chapters. Volunteers have a Primary Agency which means they are able to take up or drop volunteer identities (through entering or exiting services) in order to meet personal and local interests. However, volunteers are relatively powerless to initiate identity changes within the services

These finding of lack of collective volunteer agency is based on the evidence that volunteers are unable to meet their collective interests or change the status quo; they lack Corporate Agency. It is managers who control volunteer identity work and who drive changes. This lack of collective agency is directly related to many of the volunteer troubles experienced by ambulance services and volunteers. The ability of managers to control volunteer identity work significantly effects the treatment of volunteers within ambulance services, the quality of rural ambulance services and over time, the make-up of the volunteer workforce.

The sense of difference between volunteers/paid workers and rural/urban in hand with a power imbalance is an underlying cause of the volunteer workforce and rural inequity. This causes an 'othering' which allows those with the collective agency to influence volunteer identity work to neglect, avoid, hide or dissimilate



about volunteer problems and issues and to maintain an inequitable resource distribution. The volunteers in this study were found to be marginalised and formed a secondary workforce in ambulance services with poorer treatment and conditions than paid staff. The dominant Moral Volunteer identity created an economic weakness that made negotiating interests difficult because it locked them into a community field of visibility. This economic weakness was culturally and structurally embedded in services and was generated by the naturalised view of volunteers as altruistic and by the rural location of the ambulance volunteers.

### **How does the cultural and structural context affect volunteer agency in rural Australia and New Zealand?**

The cultural and structural contexts of this study underpin the lack of volunteer collective agency and contribute to the maintenance of a status quo of inequity. Rural location is one of the generative mechanisms that maintain volunteers as Primary Agents because the geographical distances and sparse populations make the development of a collective voice and therefore collective agency difficult. The inequity experienced by rural ambulance volunteers is a subset of an inequity experienced by rural populations as their limited voting power in an urban centric world means their rural health needs can be hidden and/or marginalised. The ‘othering’ and cultural normalising of utopian views of both the Moral Volunteer identity and ‘communities’ support the status quo that benefits urban populations and paid workers.

The study also shows how social ‘knowledge elites’, such as academics and policy makers influence volunteer identity work through discourses about good citizens, community participation and reciprocity. Evidence of the macro to micro knowledge flow was found in the shifting of ambulance volunteer identity work over time, clearly influenced by broader social conditions. The recent cultural changes towards citizen responsibility and communities of action will work to maintain this underlying inequity unless new mechanisms for collective voice and representation are developed. Disparity between rural and urban service provision and volunteer and paid staff conditions may actually increase if cultural changes

hide the economic consequences of structural changes such as government withdrawal from service provision responsibility.

### **How does volunteer identity work within Australian and New Zealand ambulance services inform a theory of volunteering?**

The final research question was answered by developing an explanatory theory of volunteering. This has been detailed in Chapter Seven and its utility has been demonstrated at both a macro and organisational level. The key elements of the theory derive from concepts proposed by Archer (2000). In this study the concept of 'interests' incorporates emotional and other personal factors and agency is understood as both Primary and Corporate. Interests and agency when used in this way provide an explanatory theory of volunteering that takes into account motivations, prosocial behaviour, networks, and cultural and structural elements in the stratified world of volunteers. By using identity work to explore volunteer agency the cultural and structural mechanisms that affect volunteers' recruitment and working conditions, such as Primary Agency and limited economic visibility, were uncovered. The flow on effects of volunteer Primary Agency, such as economic marginalisation on the populations serviced by volunteers was also highlighted.

By answering these research questions this study has answered the research aim set out at the beginning of this study, showing the extent and constraints on volunteer agency at the volunteer/service interface. A theory of volunteering has been proposed that is based on volunteers' interests and identities in a culturally and structurally stratified world.

### **Strengths of the research approach**

Using identity work as a theoretical lens was significant for the novelty of this study. The focus on identity work allowed this study to assess power dynamics at the volunteer/ambulance service interface. Examining the negotiation of interests shed light on the power dynamics between ambulance volunteers and services and the differences in interests and agency that are part of the volunteer/service interplay. Other recent studies have considered volunteers in connection with

identity. However, these have generally maintained an individualist focus on volunteers, have studied identity not identity work, and thus they have not demonstrated the effects of the socio-cultural world on volunteers identity work (Grube, and Piliavin 2000; Piliavin et al. 2002).

Equally, the critical realist ontology was significant for the novelty and strength of this study. The critical realist approach allowed the thesis to develop from retrodution of evidence, to events, to causality using theory as a guide. Whilst there was a large data acquisition process, this study approach, enabled the analysis to move away from descriptive experiential studies that take individuals experiences as the only basis for truth. It also enabled a move away from reductionist uses of empirical evidence (Archer 2000; Easton 2000; Willmott 2000). By taking this approach the study sheds light on the understudied areas of interactions between actors, culture and structure in organisations (Willmott 2000: 83) and more clearly illustrates problems for the volunteer workforce.

The second strength of the critical realist ontology was provided by Archer's (2000) approach to agency and interests. A new facet is revealed on volunteer concepts of motivation, commitment, recruitment and retention by situating the volunteer subject as a reflexive agentive subject, in a stratified life world. This study moves away from the individualistic focus which dominates so much of the volunteer literature, and instead makes sense of the macro and micro context of the volunteer life situation.

### **Limitations of the research approach**

Such an approach though does have limitations. While the study framework acknowledges a real world, my findings are necessarily fallible and therefore cannot be represented as fact because of the complexity and invisibility of the stratified world. However, the use of established research processes ensured that while the findings are not claimed as a final truth, they have the robustness provided by tested methods. Hence the contribution of the study is founded on the 'particular expert procedures' (Wetherall 2001: 397) used in the research process, and providing a fresh perspective to taken for granted knowledge. The development of an explanatory theory provides a step forward in increasing

knowledge of volunteering and volunteers, and provides a launching pad from which others can test the theoretical premises, thereby increasing knowledge further. The explanatory theory emerging from this study is not an end point, but a step in the journey of knowledge.

Equally, the empirical data cannot be claimed as representative of all volunteers because of the case study design. However, studies such as this generalise on the basis of theory, not representativeness. Therefore it is the theoretical insights provided by this thesis that can be generalised to broader volunteer services and volunteer populations, when the elements of context and discourse are considered (Fairclough 1992; Yin 1994). In addition to the case study design, because the study analysed discourse, which to a certain degree will be shared within a field, aspects of the findings will be relevant within health services and volunteering fields.

A further limitation of the study arose from the need to maintain organisational confidentiality. Confidentiality came at a price to transparency of the research process. While research process transparency is affected, the data validity is not as the use of a typology allowed me to address some of the variation in ambulance services without naming any particular service. The study approach and limits to transparency arising from the ethical issue of ambulance confidentiality mean that where the study findings are generalised, this is based on the application of theory, not a claim to broad empirical data gathering.

## **Future directions**

These findings have implications for policy planners, managers and volunteers and provide ideas about how they can mitigate some of the very real problems experienced when volunteers interface with health/human service providers. By opening up the thinking about service volunteers and providing an explanatory theory of volunteering that captures society and agency, new directions can be ‘thought about’.

Translating the implications and ideas generated by this study into concrete recommendations is complicated because the findings are contextualised to rural

ambulance services. However, the demonstrated interplay between macro socio-cultural conditions and ambulance volunteer agency has several broad implications for service volunteers in the current context of communitarian and neo-liberal policies. To introduce the implications of this study for volunteering and demonstrate the relevance of the thesis findings I will describe some recent events.

As this study reached its concluding phase the issues around volunteers began to receive increased attention in Australia. Wild weather, drought and fires over the 2006/2007 summer raised the profile of emergency service volunteers and they were widely lauded and applauded. In January 2007 a report was officially released *The Cost of Volunteering: a report on a national survey of emergency management volunteers* (King et al. 2006). This report identified that an average direct financial cost to the surveyed emergency service volunteers in a twelve month period was \$544. The amount varied according to employment status, for example, increasing significantly with self-employment. The report also found that ‘those on low incomes were making significant contributions to sustain their level of volunteering’ (King et al. 2006: 6). This report makes a welcome addition to the volunteering literature and adds weight to the findings of this study.

At first glance, the report may be seen as the beginning of an end to the economic invisibility of volunteers identified by this study. But the report preamble by the chair of the funding body<sup>39</sup> (the Australian Emergency Management Forum) reproduces the patterns found within this study. He says “We must continue to reiterate that our volunteers accept there will be a cost to being a volunteer in the emergency sector, but it must be kept to a reasonable amount. They also absolutely reject any notion of a fee for service, because then they would no longer be volunteers’ (Howard 2007). Here again we find the reinforcement of the volunteer/paid binary opposition, a subjective assessment that costs should ‘be kept to a reasonable amount’ and more worryingly an ‘acceptance’ that volunteering will cost more than time. There are also deeper social and economic

<sup>39</sup> The prelude is on the download website page for the report

issues in the emergency management volunteer section that the report ignores. For example, emergency volunteers save insurance companies significant sums of money every time they tarpaulin a leaking roof, put out a fire or rescue a sinking ship. The link between costs to volunteers and savings to insurance companies is not made in the report instead it suggests ideas for mitigating volunteer costs or providing tax relief reimbursements. While the report has raised the issue of costs and reimbursement for emergency volunteers it has been done within a framework that reinforces the status quo and the economic weakness of volunteers.

This thesis opens up such taken-for-granted thinking about volunteering to new dialogue, increasing the emancipation ability of those who desire it, but does not suggest emancipation for those who feel content with their life. With this understanding, there are four recommendations emerging from the discussion and thesis implications.

## **Recommendations**

Recommendations based on this study's findings revolve around rethinking volunteers' involvement with services. Research and policy objectives need to acknowledge the cultural and structural power dimensions involved in the volunteer/service interplay. More specifically:

1. For policy makers and academics, changes in broad societal discourse need analysis using frameworks that account for power relations and link macro and micro elements of society. Such analysis needs to occur before wide-spread acceptance and promotion of new discourse such as those of social capital, community reciprocity, or responsible citizens if promotion of the status quo is to be avoided.
2. For service managers, developing answers to volunteer troubles needs to avoid 'objectifying' volunteers as the problem. Effectively incorporating volunteers into ambulance services requires acknowledging volunteers' interests, and accepting that managers' and volunteers' interests are not always the same. Efforts to

structure work roles and organisational systems that create interest overlap and minimise interest conflicts would improve the volunteer/service interface.

3. Recruitment of volunteers is largely influenced by the identity work within services. Recruitment and retention efforts need to be understood in this manner and linked to the interests of the available pool of potential volunteers, not manager's interests.

4. For volunteers, collective voice is an important component in maintaining viable collective volunteer identities. Therefore opportunities for: gathering together with larger groups of volunteers, for contributing 'voice' to collective interests, and for being effectively represented will ultimately benefit both volunteers and the groups or populations that lead volunteers to service work.

5. For all, developing systems (especially communication and human resource systems) that increase the collective agency of service volunteers to a level where they can effectively negotiate interests will help to bring the grassroots benefits that volunteers promise into services and into society.

For managers, these study findings challenge the cultural and structural nature of under-resourcing and poor management standards of volunteers. It shows how Committee and Board level volunteers cannot be assumed to represent the interests of service volunteers, and how innovative strategies need to be designed to incorporate the voice and interests of volunteers into planning. Any such system cannot assume a vocal advocacy type volunteer, as the service volunteer identity does not generally attract or foster such individuals. Instead new organisational communication systems should attempt to draw in the voices of volunteers, and organisational design should ensure that volunteers' and managers' interests have significant areas of overlap. For example, a system that is open to hearing and acting upon individual and local team issues, and that facilitates regional, state and national get-togethers to discuss collective issues is

likely to fit a service volunteer ethos more than an adversarial union style system. Structural communication systems and work hierarchies that factor in an overlap in interests between volunteers, paid staff and managers could lead to important improvements in volunteer treatment.

For volunteers, this study provides a framework whereby they can assess the value and integrity of any volunteer roles they may consider. Volunteers can look beyond the representations of a volunteer identity to question how volunteers are treated within an organisation. For those volunteers attempting to meet collective interests through service volunteering they can begin to look at the broader structural factors involved in their volunteer service. For the many volunteers who find that the personal gains of satisfying work, increased self-esteem and social connectivity are adequate returns for their donated volunteer time this study does not suggest that they should desist, or that they are being duped. They are meeting their personal and social interest in an effective manner.

In summary, this study highlights that future directions in volunteering require a new framework for thinking about volunteers and research studies that focus on the multi-faceted economic reality of volunteering. Societal expectations of volunteers need to be challenged and volunteer troubles need to be illuminated and examined.

Assumptions about volunteers need to be questioned, particularly those that lead to policy directions. For instance, the neo-liberal inspired withdrawal of rural health services assume that volunteers can and will provide necessary services through collective action. But this study highlights how any collective action will be dependent on how broad socio-cultural conditions and local and personal contexts affect individuals' interests. Also, while there is some support for the neo-liberal and communitarian belief that people will collaborate to meet personal and collective interests, the resulting services should not be assumed to be 'good' in their own right. Local collective action that is driven by good citizens may indeed be less suitable for certain types of services than a paid professional service. These issues need further research to unpack the policy assumptions that



underpin them and to ensure that community participation policy approaches do not increase the disadvantage of already disadvantaged communities.

As well, it is time for the (re)inclusion of social equity discourses into policy discussions. Most policies targeting volunteers assume that volunteers can be heard in the policy context. Yet this study shows that such an assumption cannot be applied to service volunteers. Instead there is a risk that a large voluntary workforce without agency will develop in conjunction with the policy focus on volunteer delivered services and welfare reciprocity unless there is more effort to incorporate volunteers into formal organisations without a loss of agency.

The current focus on increasing volunteer participation in service provision will ultimately be counter-productive to the interests of both government and volunteers unless there are systems in place that facilitate a volunteers' collective agency. Otherwise, the moral economy benefits that volunteering promises, may elude governments because volunteers will have little power to influence the directions of the organisations they serve. Without techniques to share power with the volunteers who participate in service provision, governments and services may ultimately fail to generate significant and sustainable community participation in service provision through volunteering.

## Bibliography

Acheson, N. 2001. "Service Delivery and Civic Engagement: disability organizations in Northern England." *Voluntas: International Journal of Voluntary and Nonprofit Organizations* 12(3):279-93.

Ackroyd, S. and S. Fleetwood. 2000. "Realism in Contemporary Organisation and Management Studies." In *Realist Perspectives on Management and Organisations*, edited by S. Ackroyd and S. Fleetwood, London: Routledge.

Adams, D. and M. Hess. 2001. "Community in Public Policy: fad or foundation?" *Australian Journal of Public Administration* 60(2):13-23.

AIHW. 2005. "Rural, Regional and Remote Health: indicators of health" [accessed on August 10th, 2005]. Available at: <http://www.aihw.gov.au/publications/phe/rrrh05/rrrh05-c00.pdf>.

Ainsworth, S. and C. Hardy. 2004. "Critical Discourse Analysis and Identity: why bother?" *Critical Discourse Studies* 1(2):225-59.

Aitken, A. 1999. "Identifying Key Issues Affecting the Retention of Emergency Service Volunteers." *Australian Journal of Emergency Management* Winter(2000):16.

Alford, J., D. O'Neill, L. McGuire, M. Considine, M. Muetzelfeldt, and J. Ernst. 1994. "The Contract State." In *The Contract State: public management and the Kennett Government*, edited by J. Alford and D. O'Neill, Geelong: Centre for Applied Social Research, Deakin University.

Almond, G. A. and S. Verba. 1989. *The Civic Culture*. Newbury Park, California: Sage.

Alvesson, M. and H. Willmott. 2003. "Introduction & Chapter 01." In *Studying Management Critically*, edited by M. Alvesson and H. Willmott, London: Sage Publications Ltd.

Anheier, H. K. 2000. "Managing Non-profit Organisations: towards a new approach". *Centre for Civil Society*. London: London School of Economics.

Annison, F. 1996. "The volunteers undervalued contribution." *Frontline* 10(1):73-76.

Arai, S. M. 2000. "Voluntary Associations as Spaces for Democracy: towards a critical theory on volunteers." *Dissertation Abstracts International: The Humanities and Social Sciences* 60(10).

Arbon, P. 1997. "Volunteers in Emergencies: What are the issues?" South Australia: St John Ambulance Australia.

Archer, M. S. 1995. *Realist Social Theory: the morphogenetic approach*. Cambridge: Cambridge University Press.

Archer, M. S. 2000. *Being Human: the problem of agency*. Cambridge: Cambridge University Press.

Australian Bureau of Statistics. 1995. "Voluntary Work: Australia" [accessed on 12th February, 1995]. Available at:

<http://abs.gov.au/ausstats/abs@.nsf/DOSSbyTopic/AD4281CD01E9EA08CA256BD00027ADFA?>

Australian Bureau of Statistics. 2000. "Voluntary Work, Australia 2000" [accessed on 1st Nov, 2000]. Available at:

<http://www.abs.gov.au/AUSSTATS/abs@.nsf/Lookup/4441.0Main+Features1200.0?OpenDocument>.

Australian Bureau of Statistics. 2001. "2001 Census of Population and Housing" [accessed on February 12th, 2001]. Available at:

<http://www.abs.gov.au/websitedbs/D3310114.NSF/4a256353001af3ed4b2562bb00121564/0fe8206bf6b0d763ca2567f4002146fc?OpenDocument>.

Australian Bureau of Statistics. 2002. "Measuring Social Capital: discussion, summary and next steps" [accessed on 12th February, 2002]. Available at:

<http://www.abs.gov.au/AUSSTATS/abs@.nsf/DetailsPage/1378.02004?OpenDocument>.

Australian Bureau of Statistics. 2003. "Australian Social Trends, Economic Resources - Expenditure: community services sector" [accessed on 12th February, 2003]. Available at:

<http://www.abs.gov.au/AUSSTATS/abs@.nsf/allprimarymainfeatures/2356424C275E3E45CA256EB400035395?opendocument>.

Australian Bureau of Statistics. 2006. "Western Australia at a Glance, 2006" [accessed on 12th February, 2006]. Available at:

<http://www.abs.gov.au/AUSSTATS/abs@.nsf/ProductsbyCatalogue/1A6BD692ACD67A42CA2570AF0026AFF5?OpenDocument>.

Australian College of Ambulance Professionals. 2005. "Professional Relationships Project: background briefing paper" [accessed on March 2, 2005]. Available at:

[http://www.acap.org.au/national/relationships/images/acap\\_prp\\_background\\_brief\\_jan2005.pdf](http://www.acap.org.au/national/relationships/images/acap_prp_background_brief_jan2005.pdf).

Australian Government. 1998. "Australia's Commonwealth Department of Health and Family Services, Budget Document 1998-99" [accessed on March 2, 1998]. Available at: <http://www.health.gov.au/internet/wcms/publishing.nsf/Content/health-pubs-budget98-media-mrws6.htm>.

Australian Government Department of Health and Ageing. 2005. "Review of the Rural, Remote, and Metropolitan Areas (RRMA) Classification" [accessed on March 2, 2005]. Available at: [www.health.gov.au/internet/wcms/](http://www.health.gov.au/internet/wcms/).

Australian Government Department of Health and Ageing. 2006. "University Departments of Rural Health" [accessed on March 2, 2006]. Available at: <http://www.health.gov.au/internet/wcms/publishing.nsf/content/workforce-education-udrh>.

Australian Government Productivity Commission. 2006. "Report on Government Services 2006" [accessed on 12th February, 2006]. Available at: <http://www.pc.gov.au/gsp/reports/rogs/2006/index.html>.

Australian Institute Health Welfare. 2003. "Labor Force - Community Studies" [accessed on 12th February, 2003]. Available at: [http://www.aihw.gov.au/labourforce/comm\\_services.cfm](http://www.aihw.gov.au/labourforce/comm_services.cfm)

Australian Institute Health Welfare (AIHW). 2002a. "Ageing in Place: before and after the 1997 aged care reforms." *Bulletin*(1).

Australian Institute Health Welfare (AIHW). 2002b. Older Australia at a glance 2002. Canberra: AIHW & DOHa.

Australian Institute of Health and Welfare, A. 2005. "Health Expenditure Australia 2003-04". *Health & Welfare Expenditure*. AIHW, Canberra: AIHW.

Baines, D. 2004. "Caring for Nothing: work organization and unwaged labour in social services." *Work Employment Society* 18(2):267-95.

Baldock, C. V. 1990. *Volunteers in Welfare*. Sydney: Allen & Unwin.

Ball, L. 2005. "Setting the Scene for the Paramedic in Primary Care: a review of the literature." *Emergency Medicine Journal* 22(12):896-900.

Baragwanath, C. A. 1997a. "Metropolitan Ambulance Service: fulfilling a vital community need". Melbourne: Auditor-General of Victoria.

Baragwanath, C. A. 1997b. "Victorian Rural Ambulance Services: fulfilling a vital community need". Melbourne: Auditor-General of Victoria.

- Baum, F. Year. "Social Capital and Health: Implications for Health in Rural Australia." In *5th National Rural Health Conference* edited by, pp. Adelaide: National Rural Health Alliance.
- Baum, F., r. Bush, C. Modra, and C. Murray. 2000. "Epidemiology of Participation: An Australian community study." *Journal of Epidemiology and Community Health* 54(6):414-.
- Baum, F. and D. Sanders. 1995. "Can Health Promotion and Primary Health Care Achieve Health for All Without a Return to their More Radical Agenda?" *Health Promotion International* 10(2):149-60.
- Bell, S. 1997. *Ungoverning the Economy: the political economy of Australian economic policy*. Oxford: Oxford University Press Australia.
- Bellah, R. 1985. *Habits of the Heart: individualism and commitment in American life* Berkeley: University of California Press.
- Bellah, R., R. Madsen, W. Sullivan, A. Swidler, and S. Tipton. 1992. *The Good Society*. New York: Vintage Books.
- Benwell, B. and E. Stokoe. 2006. *Discourse and Identity*. Edinburgh: Edinburgh University Press Ltd.
- Beresford, Q. 2000. *Governments, Markets and Globalisation: Australian public policy in context*. St Leonards: Allen and Unwin.
- Bergent & Co. Pty Ltd. 1993. "CFA Volunteer Attitude Survey". Melbourne: Country Fire Authority.
- Beveridge, L. 1948. *The Evidence for Voluntary Action*. London: George Allen & Unwin Ltd.
- Bhaskar, R. 1975. *A Realist Theory of Science*. Bristol: Leeds Books Ltd.
- Bhaskar, R. 1989. *Reclaiming Reality: a critical introduction to contemporary philosophy*. London: Verso.
- Billis, D. 1993. *Organising Public and Voluntary Agencies*. London: Routledge.
- Bleiker, R. 2003. "Discourse and Human Agency." *Contemporary Political Theory* 2:25-47.
- Boix, C. and D. N. Posner. 1998. "Social Capital: explaining its origins and effects on government performance." *British Journal of Political Science* 28(4):686-93.

Boston, J., J. Martin, J. Pallot, and P. Walsh. 1996. *Public Management: the New Zealand model*. Auckland: Oxford University Press.

Brennan, T. 1989. "A Methodological Assessment of Multiple Utility Framework." *Economic Philosophy* 5(2):189-208.

Brett, J. 2003. *Australian Liberals and the Moral Middle class: from Alfred Deakin to John Howard*. Cambridge: Cambridge University Press.

Brown, E. 1999. "The Scope of Volunteer Activity and Public Service." *Law and Contemporary Problems* 62(4):17-42.

Brown, K. M., S. Kenny, and B. S. Turner. 2002. "A Basis for Associations? The role of third sector welfare organisations." *Community, Work & Family* 5(2):159-89.

Brown, K. M., S. Kenny, B. S. Turner, and J. K. Prince. 2000. *Rhetorics of Welfare: uncertainty, choice, and voluntary associations*. Houndsmill: Macmillan Press Ltd.

Browne, P. 2000. "Time is money." *Health Services Journal* 3 February: 28-29.

Brudney, J. 1999. "The Effective Use of Volunteers: best practices for the public sector." *Law and Contemporary Problems* 62(4):219-56.

Brudney, J. L. and T. G. Nezhina. 2005. "What is Old is New Again: achieving effectiveness with volunteer programs in Kazakhstan." *Voluntas: International Journal of Voluntary and Nonprofit Organizations* 16(3):293-308.

Burchall, G., C. Gordon, and P. Miller. 1991. "The Foucault Effect: studies in governmentality". Hemel Hempstead: Harvester Wheatsheaf.

Butcher, J. 2006. "Government, The Third Sector, and the Rise of Social Capital." *Third Sector Review* 12(1):69-88.

Calhoun, C. 1995. *Critical Social Theory*. Cambridge: Blackwell Publishers Inc.

Callinicos, A. T. 2006. *The Resources of Critique*. Cambridge: Polity Press.

Cameron, A. A. 1997. "In Search of the Voluntary Sector: a review article." *Journal of Social Policy* 26(1):79-88.

Chambre, S. M. 1995. "Being Needful: family, love, and prayer among AIDS volunteers." *Research on the Sociology of Health Care* 12:113-39.

- Clary, E. G. and M. Snyder. 1991. "A Functional Analysis of Altruism and Prosocial Behaviour: the case of volunteerism." In *Review of Personality and Social Psychology*, edited by M. Clark, pp. 119-48. Newbury Park: Sage.
- Clary, E. G., M. Snyder, R. Ridge, J. Copeland, A. Stukas, J. Haugen, and P. Miene. 1998. "Understanding and Assessing the Motivations of Volunteers: a functional approach." *Journal of Personality and Social Psychology* 74(6):1516-30.
- Cloke, P. and J. Little. 1997a. "Conclusion: marginality and rural others." In *Contested Countryside Cultures*, edited by P. Cloke and J. Little, pp. 272-85. London: Routledge.
- Cloke, P. and J. Little. 1997b. "Contested Countryside Cultures". pp. 1-285. London: Routledge.
- Cnaan, R. A., F. Handy, and M. Wadsworth. 1996. "Defining Who is a Volunteer: conceptual and empirical considerations." *Nonprofit and Voluntary Sector Quarterly* 25(3):364-83.
- Cockram, J. 2003. "The Impact of Compulsory Community Participation on the Not for Profit Sector in Western Australia." *Australian Journal on Volunteering* 8(1):5-14.
- Collier, P. 1998. "Social Capital and Poverty". *Social Capital Initiative*. pp. 1-28. Washington DC: The World Bank.
- Commission for Social Development. 2001. "The Role of Volunteerism in the Promotion of Social Development" [accessed on 26th March, 2001]. Available at: [http://www.worldvolunteerweb.org/development/soc\\_dev/panel\\_soc\\_dev.htm#I](http://www.worldvolunteerweb.org/development/soc_dev/panel_soc_dev.htm#I).
- Commonwealth of Australia. 2005. "Australian Government Budget 2005-06: expense measures Health and Ageing" [accessed on August 6th, 2005]. Available at: <http://www.budget.gov.au/2005-06/bp2/html/expense-14.htm>.
- Commonwealth of Australia and Volunteering Australia. 2003. "Working With Volunteers and Managing Volunteer Programs in Health Care Settings". Canberra: National Health & Medical Research Council.
- Connery, B. 1990. "Recruitment Through Retention." *Emergency* December:53.
- Cooper, S. 2005. "Contemporary UK Paramedical Training and Education. How do we train? How should we educate?" *Emergency Medicine Journal* 22(5):375-79.

Cordingley, S. 2000. "The Definition and Principles of Volunteering." In *Volunteers and Volunteering*, edited by D. J. Warburton and M. Oppenheimer, pp. 73-82. Leichardt: The Federation Press.

Costello, P. Year. "Address to Communities in Control Conference 18/06/04." In *Communities in Control Conference* edited by, pp. Moonee Ponds:Parliamentary Secretary's Website, Minister for Revenue and Assistant Treasurer's Website.

Cox, E. 2000. "The 'Light and Dark' of Volunteering." In *Volunteers and Volunteering*, edited by J. Warburton and M. Oppenheimer, pp. 140-49. Leichhardt: The Federation Press.

Crampton, P., A. Woodward, and A. Dowell. 2001. "The Role of the Third Sector in Providing Primary Care Services - Theoretical and Policy Issues." *Social Policy Journal of New Zealand*(17):1-21.

Creswell, J. W. 2003. *Research Design: qualitative, quantitative and mixed method approaches*. Thousand Oaks: Sage Publications.

Cuthill, M. and J. Warburton. 2005. "A Conceptual Framework for Volunteer Management in Local Government." *Urban Policy and Research* 23(1):109-22.

Dahl, R. 1957. "The Concept of Power." *Behavioural Science* 2:201-15.

Darcy, M. 1999. "The Discourse of 'Community' and the Reinvention of Social Housing Policy in Australia." *Urban Studies* 36(1):13-26.

Dartington, T. 1992. "Professional Management in Voluntary Organisations: some cautionary notes." In *Issues in Voluntary and Non-profit Management*, edited by C. Batsleer, C. Cornforth, and R. Paton, London: Addison-Wesley.

Davis Smith, J. 1996. "Should Volunteers Be Managed?" In *Voluntary Agencies*, edited by D. Billis and M. Harris, pp. 187-99. Basingstoke: MacMillan.

Davis Smith, J. Year. "Beyond Social Capital: what next for voluntary action research?" In *Inaugural Volunteering Research Symposium* edited by V. Australia, pp. Melbourne:Volunteering Australia.

De Tocqueville, A. 1953. *Democracy in America*. New York: Alfred A. Knoff Inc.

Dean, M. 1999. *Governmentality: Power and Rule in Modern Society*. London: Sage Publications.



Dekker, P. and A. van den Broek. 1998. "Civil society in Comparative Perspective: involvement in voluntary associations in North America and Western Europe." *Voluntas* 9(1):11-38.

Department of Health. 2001. "Reforming Emergency Care". London: Department of Health, United Kingdom.

Department of Health. 2005. "Taking Healthcare to the Patient: transforming NHS ambulance services" [accessed on 12th September, 2005]. Available at: [www.dh.gov.uk/PolicyandGuidance/OrganisationPolicy/EmergencyCare/KeyEmergencyCareDocuments/fs/en](http://www.dh.gov.uk/PolicyandGuidance/OrganisationPolicy/EmergencyCare/KeyEmergencyCareDocuments/fs/en).

Dill, B. T. 2001. "Rediscovering Rural America." In *The Blackwell Companion to Sociology*, edited by J. Blau, pp. 198-210. Malden: Blackwell Publishing.

Dodd, T. 2002. "Personal Communication". C. Fahey.

Dollery, B. and J. Wallis. 2001. "Social Service Delivery and the Voluntary Sector in Contemporary Australia." *Australian Journal of Political Science* 36(3):657-575.

Donzelot, J. 1991. "The Mobilization of Society." In *The Foucault Effect*, edited by G. Burchall, C. Gordon, and P. Miller, Hemel Hempstead: Harvester Wheatsheaf.

Driscoll, P., J. Editors, and J. Wardrope. 2003. "Reforming Emergency Care." *Emergency Medical Journal* 20:111.

Durkheim, E. 1951. *Suicide, a Study in Sociology*. New York: Free Press.

Easton, G. 2000. "Case Research as a Method for Industrial Networks: a realist apologia." In *Realist Perspectives on Management and Organisations*, edited by S. Ackroyd and S. Fleetwood, pp. 205-19. London: Routledge.

Ellis, S. J. 1997. "Trends and Issues in Volunteerism in the USA." *Australian Journal of Volunteering* 2(2):29-33.

Emergency Management Australia. 2001. "Value Your Volunteers or Lose Them: summit report". pp. 1-118.

Emergency Management Australia. Year. "Safer Sustainable Communities." In *2003 Australian Disaster Conference* edited by E. M. Australia, pp. Canberra: Australian Government.

Emergency Management Australia. 2003b. "Suppose There Was an Emergency and Nobody Came: guidelines for managing the risks of using volunteers in

emergency situations" [accessed on June 12th, 2003b]. Available at:  
[http://www.ema.gov.au/agd/ema/rwpattach.nsf/viewasattachmentPersonal/2C651BD59161A92CCA256D7B0018385E/\\$file/Surgam%20Final%20Report.pdf](http://www.ema.gov.au/agd/ema/rwpattach.nsf/viewasattachmentPersonal/2C651BD59161A92CCA256D7B0018385E/$file/Surgam%20Final%20Report.pdf).

Emy, H. V. and O. E. Hughes. 1991. Australian Politics : realities in conflict. Melbourne: MacMillan Education Australia Pty. Ltd.

Etzioni, A. 1968. The Active Society: a theory of societal and political processes. London: Collier-MacMillan.

Etzioni, A. 1993. Spirit of Community: the reinvention of American society. New York: Touchstone Rockefeller Center.

Everingham, C. Year. "The Imagined Community of Access and Equity." In *National Social Policy Conference: social policy and the challenges of social change* edited by, pp. 25-40. Sydney: Social Policy Research Centre UNSW.

Fahey, C. and J. Walker. 2001a. "Asking Volunteers - Volunteer Ambulance Officers have their say! The More than a Band-Aid Project Report". *University Department of Rural Health, Tasmania*. Hobart: University of Tasmania.

Fahey, C. and J. Walker. 2001b. "It's more than numbers! The advantages of mixed-method inquiry in volunteer organisations." *Australian Journal on Volunteering* 6(2):49-53.

Fahey, C. and J. Walker. 2002. "Emergency Services in Australia and New Zealand: problems and prospects for volunteer ambulance officers". pp. 1- 70. Hobart: University of Tasmania.

Fahey, C., J. Walker, and G. Lennox. 2003. "Flexible, Focused Training Keeps Volunteer Ambulance Officers." *Journal of Emergency Primary Health Care* 1(12).

Fairclough, N. 1992. Discourse and Social Change. Cambridge: Polity Press.

Fairclough, N. 2003. Analysing Discourse: textual analysis for social research. London: Routledge.

Fairclough, N. and R. Wodak. 1997. "Critical Discourse Analysis: an overview." In *Discourse and Interaction*, edited by T. v. Dijk, pp. 67-97. London: Sage.

Federal Emergency Management Agency. 1995. Emergency Medical Services Recruitment and Retention Manual: Federal Emergency Management Agency.

Federal Emergency Management Agency. 1998. Recruitment and Retention in the Volunteer Fire Service, Problems and Solutions: Federal Emergency Management Agency.

Fisher, K., R. Patulny, and M. Bittman. 2004. "Measuring Volunteering in Australia Using Time Diary and Annual Participation Estimates." *Australian Journal of Volunteering* 9(2):25-35.

Fisher, L. R. and K. B. Schaffer. 1993. Older Volunteers: a guide to research and practice. Newbury Park: Sage.

Fitch, J. 1994. "Endangered Species: volunteers." *Emergency Medical Services* November:38.

Flick, M., M. Bittman, and J. Doyle. 2002. "The Community's Most Valuable [Hidden] Asset - Volunteering in Australia". pp. 1-100. Sydney: Social Policy Research Centre University of New South Wales.

Foucault, M. 1972. The Archeology of Knowledge and the Discourse on Language. London: Tavistock.

Foucault, M. 1980. Power/Knowledge. Brighton: Harvester.

Foucault, M. 1981. History of Sexuality. Harmondsworth: Penguin Books.

Foucault, M. 1982. "The Subject and the Power." In *Michael Foucault: beyond structuralism and hermeneutics*, edited by M. Dreyfus and P. Rainbow, Chicago: The University of Chicago Press.

Foucault, M. 1988a. "Technologies of the Self." In *Technologies of the Self: a seminar with Michel Foucault*, edited by L. H. Martin, H. Gutman, and P. H. Hutton, pp. 16-49. London: Tavistock.

Foucault, M. 1988b. "Truth, Power, Self: an interview with Michel Foucault October 25th 1982." In *Technologies of the Self: a seminar with Michel Foucault*, edited by L. H. Martin, H. Gutman, and P. H. Hutton, pp. 145-62. London: Tavistock.

Foucault, M. 1991a. Discipline and Punish: the birth of the prison. London: Penguin.

Foucault, M. 1991b. "Governmentality." In *The Foucault Effect: studies in governmentality*, edited by G. Burchall, C. Gordon, and P. Miller, Chicago: University of Chicago Press.

Foucault, M. 1991c. "Politics and the Study of Discourse." In *The Foucault Effect*, edited by G. Burchall, C. Gordon, and P. Miller, Hemel Hempstead: Harvester Wheatsheaf.

Foucault, M. 1994. *The Order of Things: an archeology of the human sciences*. New York: Vintage Books.

Friedman, M. and R. Friedman. 1980. *Free to Choose: a personal statement*. New York: Harcourt.

Fukuyama, F. 1995. *Trust : the social virtues and the creation of prosperity*. New York: Free Press Paperbacks.

Fyfe, N. R. and C. Milligan. 2003. "Out of the Shadows: exploring contemporary geographies of voluntarism." *Progress in Human Geography* 27(4):397-413.

Gerard, D. 1985. "What Makes a Volunteer?" *New Society* 74(1193):236-38.

Giddens, A. 1991. *Modernity and Self-Identity*. Cambridge: Polity Press.

Giddens, A. 1998. *The Third Way: The Renewal of Social Democracy*. Cambridge: Polity Press.

Giddens, A. 2001. "Introduction." In *The Global Third Way Debate*, edited by A. Giddens, Cambridge: Polity press.

Gintis, H. 2003. "Solving the Puzzle of Prosociality." *Rationality and Society* 15(2):155-87.

Gintis, H., S. Bowles, R. Boyd, and E. Fehr. 2003. "Explaining Altruistic Behaviour in Humans." *Evolution and Human Behaviour* 24:153-72.

GISCA. 2000. "Accessibility/Remoteness Index of Australia (ARIA)". Canberra: Department of Health and Aged Care.

Glucksmann, M. 1995. "Why Work? Gender and the Total Social Organisation of Labour." *Gender, Work and Organisation* 2(2):63-75.

Glucksmann, M. 2000. *Cottons and Casuals: The Gendered Organisation of Labour in Time and Space*. Durham: Sociology Press.

Greenfield, E. A. and N. F. Marks. 2004. "Formal volunteering as a Protective Factor for Older Adults' Psychological Well-Being." *Journal of Gerontology* 59B(5):S258-S64.

Grootaert, C. 1998. "Social Capital: The Missing Link?" pp. 1-22. Washington DC: The World Bank.

Grossman, J. B. and K. Furano. 1999. "Making the Most of Volunteers." *Law and Contemporary Problems* 62(4):199-218.

Grube, J. A. and J. A. Piliavin. 2000. "Role Identity, Organizational Experiences, and Volunteer Performance." *Personality and Social Psychology Bulletin* 26(9):1108-19.

Guppy, L. and M. Woollard. 2000. "Emergency Ambulance Services: performance management and review." *Pre-hospital Immediate Care* 4:40-45.

Hacking, I. 1991. "How Should we do the History of Statistics?" In *The Foucault Effect*, edited by G. Burchall, C. Gordon, and P. Miller, pp. 181-89. Hemel Hempstead: Harvester Wheatsheaf.

Hall, S. 2001a. "Foucault: power, knowledge and discourse." In *Discourse Theory and Practice: a reader*, edited by M. Wetherall, S. Taylor, and S. Yates, pp. 72-81. London: Sage Publications.

Hall, S. 2001b. "The Spectacle of the 'Other'." In *Discourse Theory and Practice: a reader*, edited by M. Wetherall, S. Taylor, and S. Yates, pp. 324-44. London: Sage Publications.

Handy, F. and N. Srinivasan. 2002. "Costs and Contributions of Professional Volunteer Management". pp. 1-7. Toronto: Canadian Centre for Philanthropy.

Harper, B. 2001. "Online Etymology Dictionary" [accessed on September 26th, 2001]. Available at: <http://www.etymonline.com/>.

Harris, M. 2001. "Voluntary Organisations in a Changing Social Policy Environment." In *Voluntary Organisations and Social Policy in Britain: perspectives on change and choice*, edited by M. Harris and C. Rochester, pp. 213-28. Houndsmill: Palgrave.

Harris, M. and C. Rochester. 2001. "Voluntary Organisations and Social Policy in Britain: perspectives on change and choice". Houndsmill: Palgrave.

Hawe, P. and A. Sheill. 2000. "Social Capital and Health Promotion: a review." *Social Science and Medicine* 51:871-85.

Hayek, F. A. 1960. *The Constitution of Liberty*. Chicago: University of Chicago Press.

Heaton, J. 1998. "Secondary Analysis of Qualitative Data" [accessed on May 21, 1998]. Available at: [www.soc.surrey.ac.uk/sru/SRU22.html](http://www.soc.surrey.ac.uk/sru/SRU22.html).

Herzog, A. R. and J. N. Morgan. 1993. "Formal Volunteer Work among Older Americans." In *Achieving a Productive Aging Society*, edited by S. A. Bass, F. G. Caro, and Y.-P. Chen, pp. 119-42. Westport, Connecticut: Auburn House.

Hindess, B. 2002. "Neo-liberal Citizenship." *Citizenship Studies* 6(2):127-43.

Hirst, P. 1994. *Associative Democracy: new forms of economic and social governance*. Cambridge: Polity Press.

Hollander, M. and N. Chappell. 2002. "Final Report of the National Evaluation of The Cost-Effectiveness of Home Care". pp. 1-33. Victoria BC: Health Transition Fund, Canada.

Howard, B. 1999. "Managing Volunteers." *Australian Journal of Emergency Management*(Spring):37-38.

Howard, H. 2007. "The Cost of Volunteering: a report on a national survey of emergency management volunteers." [accessed on 23rd January, 2007]. Available at: [www.ema.gov.au/agd/EMA/emainternet.nsf/PageRWP7422DA95737026ACCA25725F00022DBF](http://www.ema.gov.au/agd/EMA/emainternet.nsf/PageRWP7422DA95737026ACCA25725F00022DBF).

Howard, J. 2000. "Opinion". *The Australian*. Sydney.

Hudgings, E. 1988. "Volunteer incentives: solving recruitment and attrition problems." *Journal of Emergency Medical Services*(June):58-61.

Hughes, O. E. 1994. *Public Management and Administration*. New York: St Martins Press Inc.

Hugo, G. 2002. "Australia's Changing Non-Metropolitan Population." In *The New Rural Health*, edited by D. Wilkinson and I. Blue, pp. 12-43. Melbourne, Australia: Oxford University Press.

Humphreys, J., D. Hegney, J. Lipscombe, G. Gregory, and B. Chater. 2002. "Whither Rural Health? Reviewing a decade of progress in rural health." *Australian Journal of Rural Health* 10(1):2-14.

Ignatieff, M. 1995. "The Myth of Citizenship." In *Theorizing Citizenship*, edited by R. Beiner, pp. 53-78. New York: State University of New York Press.

Ilcan, S. and T. Basok. 2004. "Community Government: voluntary agencies, social justice, and the responsabilization of citizens." *Citizenship Studies* 8(2):129-44.

Ironmonger, D. 2000. "Measuring Volunteering in Economic Terms: 2,200 million hours worth \$42 billion a year." In *Volunteers and Volunteering*, edited by J. Warburton and M. Oppenheimer, pp. 56-72. Leichhardt: The Federation Press.

Joint Standing Committee on Community Development. 2003. "Report on Ambulance Services in Tasmania". pp. 1-63. Hobart: Parliament of Tasmania.

Katz, S. 2001. "Michel Foucault." In *Profiles in Contemporary Social Theory*, edited by A. Elliot and B. S. Turner, pp. 117-27. London: Sage Publications Ltd.

Keating, M. and P. Weller. 2001. "Rethinking Government's Roles and Operations." In *Are You Being Served? State, Citizens and Governance*, edited by G. Davis and P. Weller, pp. 73-97. Crows Nest: Allen & Unwin.

Kenny, S. 2003. "Constructions of Volunteerism in Third Sector Organisations: some comparisons." *Australian Journal of Volunteering* 8(1):15-22.

Kerr, L. and D. Tedmanson. 2003. "'Active Citizenship', Social Capital and Diversity: when volunteering falls 'outside the square'." *Australian Journal of Volunteering* 8(1):23-32.

Kilner, T. 2004. "Desirable Attributes of the Ambulance Technician, Paramedic, and Clinical Supervisor: findings from a Delphi study." *Emergency Medicine Journal* 21(3):374-78.

King, S., J. Bellamy, and C. Donaho-Hunt. 2006. "The Cost of Volunteering: a report on a national survey of emergency management volunteers". pp. 1-50. Canberra: Anglicare.

Kingdon, J. W. 2002. *Agendas, Alternatives, and Public Policies*. Essex: Longman.

Klandermans, B. 2000. "Identity and Protest: how group identification helps to overcome collective action dilemmas." In *Cooperation in Modern Societies: promoting the welfare of communities, states and organisations*, edited by M. Van Vugt, M. Snyder, T. Tyler, and A. Biel, pp. 162-83. London: Routledge.

Klandersman, B. 2001. "Why Social Movements Come into Being and Why People Join Them." In *The Blackwell Companion to Sociology*, edited by J. Blau, pp. 268-81. Malden: Blackwell Publishing.

Knack, S. 1999. "Social Capital, Growth and Poverty: a survey of cross-country evidence". pp. 1-34. Washington, DC: The World Bank.

Knapp, M., V. Koutsogeorgopoulou, and J. Davis Smith. 1995. *Who Volunteers and Why? The key factors which determine volunteering*. London: The Volunteer Centre.

Knight, B. 1993. *Voluntary Action*. London: Centris.

Knoke, D. and R. Thompson. 1977. "Voluntary Association Trends and the Family Life Cycle." *Social Forces* 56:48-65.

Knox, T. M. 1999. "The Volunteer's Folly and Socio-economic Man: some thoughts on altruism, rationality, and community." *Journal of Socio-Economics* 28:475-92.

Kolberg, J. and A. Kolstad. 1993. "The Post-industrial Stratification Order: the Norwegian experience." In *Stratification and Mobility in Post-Industrial Societies*, edited by G. Esping-Anderson, pp. 58-79. London: Sage Publications Ltd.

Lacey, A. and S. Ilcan. 2006. "Voluntary Labor, Responsible Citizenship, and International NGOs." *International Journal of Comparative Sociology* 47(1):34-53.

Larson, A. 2002. "Contemporary Rural Australian Society." In *The New Rural Health*, edited by D. Wilkinson and I. Blue, pp. 3-11. Melbourne, Australia: Oxford University Press.

Lendrum, K., S. Wilson, and M. W. Cooke. 2000. "Does the Training of Ambulance Personnel Match the Workload Seen?" *Pre-hospital Immediate Care* 4(7-10).

Lennox, G. 2000. "A Message of Support for VAOs". *First Response*.

Lenski, G. E. 1966. *Power and Privilege: a theory of social stratification*. New York: McGraw-Hill Book Company.

Leonard, R., J. Onyx, and H. Hayward-Brown. 2004. "Volunteer and Coordinator Perspectives on Managing Women Volunteers." *Nonprofit Management & Leadership* 15(2):205-19.

Lipton, M. 1977. *Why Poor People Stay Poor: a study of urban bias in world development*. London: Temple Smith.



Lizard Drinking Business Solutions. 2003. "Review of the South Australian Ambulance Service". Adelaide: Lizard Drinking Business Solutions.

Lukes, S. 1973. *Individualism*. New York: Harper & Row.

Lukka, P. and A. Ellis. 2001. "An Exclusive Construct? Exploring different cultural concepts of volunteering." *Voluntary Action* 3(3):87-109.

Lyons, M. Year. "The Capacity of Nonprofit Organisations to Contribute to Social Capital Formation under Market Style Government Funding Regimes." In *National Social Policy Conference* edited by, pp. Sydney: University of New South Wales.

Lyons, M. 1998. "Defining the Nonprofit Sector: Australia". *Working Papers of the John Hopkins Comparative Nonprofit Sector Project*. L. M. Salamon and H. K. Anheier, pp. 1-20. Centre for Australian Community Organisations and Management.

Lyons, M. 2001. *Third Sector: the contribution of nonprofit and cooperative enterprises in Australia*. Crows Nest: Allen & Unwin.

Lyons, M. and S. Hocking. 2000. "Australia's Highly Committed Volunteers." In *Volunteers and Volunteering*, edited by D. J. Warburton and M. Oppenheimer, pp. 44-55. Leichardt: The Federation Press.

Marr, A. 2003. "A Message From The Editor." *Journal of Emergency Primary Health Care* 1(3-4):1-2.

Marsden, R. 2005. "The Politics of Organizational Analysis." In *Critical Management Studies*, edited by C. Grey and H. Willmott, pp. 132-70. Oxford: Oxford University Press.

Marwell, G. and P. Oliver. 1993. *The Critical Mass in Collective Action: a micro-social theory*. Cambridge: Cambridge University Press.

Marx, J. D. 1999. "Motivational Characteristics Associated with Health and Human Service Volunteers." *Administration in Social Work* 23:51-66.

Mason, S., J. Wardrope, and J. Perrin. 2003. "Developing a Community Paramedic Practitioner Care Support Scheme for Older People with Minor Conditions." *Emergency Medicine Journal* 20:196-98.

Maybin, J. 2001. "Language, Struggle and Voice: the Bakhtin/Volosinov writings." In *Discourse Theory and Practice: a reader*, edited by M. Wetherall, S. Taylor, and S. Yates, pp. 64-71. London: Sage Publications.

McClure. 2000. "Participation Support for a More Equitable Society". Canberra: Commonwealth of Australia.

McDonald, C. and G. Marston. 2002. "Patterns of Governance: the curious case of non-profit community services in Australia." *Social Policy & Administration* 36(4):376-91.

McDonald, C. and J. Warburton. 2003. "Stability and Change in Nonprofit Organizations: the volunteer contribution." *Voluntas: International Journal of Voluntary and Nonprofit Organizations* 14(4):381-99.

McDowell, D. 1999. "Love 'Em or They'll Leave: Motivating Volunteers." *Emergency Medical Services*(November):70.

McGrath, K. M. 2003. "Organisational Culture and Information Systems Implementation: a critical perspective". *Information Systems*. pp. 297. London: London School of Economics and Political Science.

McHoul, A. W. and W. Grace. 1993. *A Foucault Primer: discourse, power and the subject*. Carlton, Victoria: Melbourne University Press.

Mead, M. 1963. *Sex and Temperament in Three Primitive Societies*. New York: Morrow.

Mehan, H. 2001. "The Construction of an LD Student." In *Discourse Theory and Practice: a reader*, edited by M. Wetherall, S. Taylor, and S. Yates, pp. 345-63. London: Sage Publications.

Mellor, P. A. 2004. *Religion, Realism and Social Theory: making sense of society*. London: Sage Publications.

Melville, R. 2002. "My Time is Not a Gift to Government: an exploratory study of NSW community legal centre volunteers." Wollongong: Institute of Social Change and Critical Inquiry, University of Wollongong.

Mercer, N. 2000. *Words & Minds: how we use language to think together*. London: Routledge.

Metzer, J., M. Dollard, L. Rogers, and S. Cordingley. 1997. "Quality of Work Life for Volunteers." *Australian Journal of Volunteering* 2(2):8-15.

Miles, M. and M. Huberman. 1994. *Qualitative Data Analysis: an expanded sourcebook*. Thousand Oaks: Sage Publications Inc.

Milligan, C. 1998. "Pathways of Dependence: the impact of health and social care restructuring - the voluntary experience." *Social Science and Medicine* 46(6):743-53.

Milligan, C. and N. R. Fyfe. 2005. "Preserving Space for Volunteers: exploring the links between voluntary welfare organisations, volunteering and citizenship." *Urban Studies* 42(3):417-33.

Mills, S. 1991. *Discourse of Difference: an analysis of women's travel writing and colonialism*. London: Routledge.

Minkoff, D. C. 2001. "Social Movement Politics and Organization." In *The Blackwell Companion to Sociology*, edited by J. Blau, pp. 282-94. Malden: Blackwell Publishing.

Mocroft, I. and C. Thomason. 1993. "The Evolution of Community Care and Voluntary Organisations." In *Researching the Voluntary Sector*, edited by S. K. Saxon-Harrold and J. Kendall, pp. 78-93. Tonbridge: Charities Aid Foundation.

Morgan, D. E. 1996. "Associative Democracy: decentralisation of societal and industrial governance? A critical discussion." *Australian and New Zealand Journal of Sociology* 32(1):1-19.

Morisey, J. 1993. "Here to stay?": Recruiting EMS volunteers." *JEMS*(February):53-58.

Morison, J. 2000. "Government-Voluntary Sector Compacts: governance, governmentality, and civil society." *Journal of Law and Society* 27(1):98-132.

Morriess, P. 1987. *Power: a philosophical analysis*. Manchester: Manchester University Press.

Morrow, R. A. and D. D. Brown. 1994. *Critical Theory and Methodology*. Thousand Oaks: Sage Publications.

Mulvaney, J. 1998. "Psychiatric Disability and Community Based Care." In *Health Matters: a sociology of illness, prevention and care.*, edited by A. R. Petersen and C. Waddell, St Leonards: Allen & Unwin Pty Ltd.

National Highway Traffic Safety Administrator. 1996. "Emergency Medical Services Agenda for the Future" [accessed on 29th August, 1996]. Available at: [www.nhtsa.dot.gov/people/injury/ems/agenda/emsman.html](http://www.nhtsa.dot.gov/people/injury/ems/agenda/emsman.html).

Neuman, W. L. 1991. *Social Research Methods: qualitative and quantitative approaches*. Boston: Allyn and Bacon.

- Neuman, W. L. 1994. "Ethical and Political Issues in Social Research." In *Social Research Methods: qualitative and quantitative approaches* pp. 427-59. Boston: Allyn & Bacon.
- Newton, J. L., P. Kyle, P. Liversidge, G. Robinson, K. Wilton, and P. Reeve. 2006. "The Costs of Falls in the Community to the North East Ambulance Service." *Emergency Medicine Journal* 23(6):479-81.
- Noble, J. 2000. "The Future of Volunteering." In *Volunteers and Volunteering*, edited by J. Warburton, pp. 150-61. Leichardt: The Federation Press.
- Noble, J. and F. Johnston. 2001. "Perspectives and Possibilities." In *Volunteering Visions*, edited by J. Noble and F. Johnston, pp. 151-62. Annandale: The Federation Press.
- Norris, P. 2001. "Making Democracies Work: social capital and civic engagement in 47 societies". Cambridge: Harvard University.
- O'Meara, P. 2002. "Models of Ambulance Service Delivery for Rural Victoria". *Scholl of Public Health and Community Medicine*. Sydney: The University of New South Wales.
- O'Meara, P. 2003. "The Prehospital Community-Volunteer Model Has a Place in Rural Australia." *Journal of Emergency Primary Health Care* 1(1-2).
- O'Meara, P., M. Burley, and H. Kelly. 2002. "Rural urgent care models: what are they made of?" *Australian Journal of Rural Health* 10(1):45-51.
- O'Meara, P., J. Walker, C. Stirling, D. Pedler, V. Tourle, K. Davis, P. Jennings, P. Mulholland, and D. Wray. 2006. "The Rural and Remote Ambulance Paramedic: moving beyond emergency response". Bathurst: School of Public Health, Charles Sturt University.
- O'Regan, J. Year. "Discourse, Domination, and What it Means to be Critical: the 'disciplining' of Foucault's perception of power in critical discourse analysis." In *International Conference on Critical Discourse Analysis: Theory into Research 15-18 November 2005* edited by Thao Le, Claire Hiller, and Kate McPherson, pp. Launceston, Australia: University of Tasmania.
- Oakley, A. 1974. *The Sociology of Housework*. London: Martin Robertson.
- Ohlin, J. 1998. "Will Privatisation and Contracting Out Deliver Community Services?" pp. ES. Canberra: Parliament of Australia.
- Olson, M. 1965. *The Logic of Collective Action: public goods and the theory of groups*. Cambridge: Harvard University Press.

Omar, I. 1998. "Review of Volunteer Legislation: identification of state and territory legislation pertaining to the employment of volunteers and professionals on interstate and territory operations". Armidale: University of New England.

Omoto, A. M. and M. Snyder. 1993. "AIDS Volunteers and their Motivations." *Nonprofit Management & Leadership* 4:157-76.

Onyx, J. 2000. "Power, Social Capital and Accountability." *Third Sector Review* 6(1/2):59-70.

Onyx, J. 2001. "Third Sector as Voice: the importance of social capital." *Third Sector Review* 7(2):73-88.

Onyx, J. and P. Bullen. 2000. "The Different Faces of Social Capital in NSW, Australia." In *Social Capital and Politics in Everyday Life*, edited by P. Dekker and E. Uslander, London: Routledge.

Onyx, J. and R. Leonard. 2000. "Women, Volunteering and Social Capital." In *Volunteers and Volunteering*, edited by J. Warburton and M. Oppenheimer, pp. 113-24. Leichardt: The Federation Press.

Onyx, J., R. Leonard, and H. Hayward-Brown. 2001. "The Experience of Volunteers in the Provision of Human Services in NSW: a regional perspective." *Australian Journal on Volunteering* 6(2):128-38.

Onyx, J. and J. Warburton. 2003. "Volunteering and Health Among Older People: a review." *Australasian Journal on Ageing* 22(2):65-69.

Oppenheimer, M. 2000. "An Overview of the Voluntary Principle in Australia." In *Volunteers and Volunteering*, edited by J. Warburton and M. Oppenheimer, pp. 9-18. Leichardt: The Federation Press.

Oppenheimer, M. and J. Warburton. 2000. "Introduction." In *Volunteers and Volunteering*, edited by J. Warburton and M. Oppenheimer, pp. 32-43. Leichardt: The Federation Press.

Parsons, T. 1967. *Sociological Theory and Modern Society*. New York: Free Press.

Patton, M. Q. 2002. *Qualitative Research & Evaluation Methods*. Thousand Oaks: Sage Publications Inc.

Paull, M. 1999. "In Search of Volunteering: a proposition." *Australian Journal of Volunteering* 4(2):19-29.

- Paull, M. 2002. "Reframing Volunteer Management: a view from the west." *Australian Journal of Volunteering* 7(1):21-27.
- Pearce, J. L. 1993. *Volunteers: the organizational behaviour of unpaid workers*. London: Routledge.
- Peck, J. 2000. "Structuring The Labour Market." In *Realist Perspectives on Management and Organisations*, edited by S. Ackroyd and S. Fleetwood, pp. 205-19. London: Routledge.
- Penner, L. A., J. F. Dovidio., J. A. Piliavin., and D. A. Schroeder. 2005. "Prosocial Behaviour: multilevel perspectives." *Annual Review of Psychology* 56(1):365-92.
- Phillips, M. H. 1982. "Motivations and Expectations in Successful Volunteerism." *Journal of Voluntary Action Research* 11:118-25.
- Philo, C. 1997. "Of Other Rurals?" In *Contested Countryside Cultures*, edited by P. Cloke and J. Little, pp. 19-50. London: Routledge.
- Piliavin, J. A., J. Grube, and P. L. Callero. 2002. "Role as a Resource for Action in Public Service." *Journal of Social Issues* 58:469-85.
- Pollitt, C. 1990. *Managerialism and the Public Services: the Anglo-American experience*. Oxford: Basil Blackwell.
- Ponthieux, S. Year. "The Concept of Social Capital: a critical review." In *10th ACN Conference 21-23 January* edited by, pp. Paris.
- Poole, D. L. 2003. "Scaling up CBOs for Second-Order Devolution in Welfare Reform." *Nonprofit Management & Leadership* 13(4):325-41.
- Porter, S. 2000. "Critical Realist Ethnography: the case of racism and professionalism in a medical setting." In *Realist Perspectives on Management and Organisations*, edited by S. Ackroyd and S. Fleetwood, London: Routledge.
- Portes, A. 2000. "The Two Meanings of Social Capital." *Sociological Forum* 15:1-12.
- Portes, A. and P. Landolt. 1996. "The Downside of Social Capital." *American Prospect* 26:19-21.
- Premier's Department NSW. 2002. "Rural and Regional Volunteering Support." *Australian Journal of Volunteering* 7(1):11-13.

Productivity Commission. 2003. "Social Capital: reviewing the concept and its policy implications". Canberra: AusInfo.

Pusey, M. 2000. "Middle Australians in the Grip of Economic 'Reform' ....Will They Volunteer?" In *Volunteers and Volunteering*, edited by J. Warburton and M. Oppenheimer, pp. 19-31. Leichardt: The Federation Press.

Putnam, R. 1993. *Making Democracy Work : civic traditions in modern Italy*. New Jersey: Princeton University Press.

Putnam, R. 2000. *Bowling alone: the collapse and revival of American community*. New York: Simon & Schuster.

QSR International Pty Ltd. 2002. *NVivo* (release software. Durham, UK.

Reich, J. 1991. "The Rural Route to Success: comparing EMS in three Alabama counties." *Journal of Emergency Medical Services* 16:53-56.

Reinholdt, S. and P. Smith. 1998. "Directions in Volunteer Development in Australian Emergency Services". Victoria: Country Fire Authority and Emergency Management Australia.

Rifkin, J. 1995. *The End of Work: the decline of the global labor force and the dawn of the post-market era*. New York: Putnam Sons.

Rifkin, S. 1986. "Lessons from Community Participation in Health Programmes." *Health Policy and Planning* 1(3):240-49.

Rose, N. 1999. *Powers of Freedom: reframing political thought*. Cambridge: Cambridge University Press.

Rubin, A. and I. M. Thorelli. 1984. "Egoistic Motives and Longevity of Participation by Social Service Volunteer Work." *The Journal of Applied Behavioural Science* 20:223-35.

Rural Expert Advisory Group to the Ministry of Health. 2002. "Implementing the Primary Health Care Strategy in Rural New Zealand". Wellington: Ministry of Health New Zealand Government.

Said, E. 1978. *Orientalism*. Harmondsworth: Penguin.

Salamon, L. M. 1987. "Of Market Failure, Voluntary Failure, and Third-Party Government." *Journal of Voluntary Action Research* 16(1):29-49.

Salamon, L. M. and H. Anheier. 1993. "A Comparative Study of the Non-profit Sector: purpose, methodology, definition and classification." In *Researching the*

*Voluntary Sector*, edited by S. K. Saxon-Harrold and J. Kendall, pp. 1-233. Tonbridge: Charities Aid Foundation.

Salamon, L. M. and H. Anheier. 1994. "Caring Sector or Caring Society? Discovering the nonprofit sector cross-nationally". *Working Papers of the John Hopkins Comparative Nonprofit Sector Project*. pp. 1-19. Baltimore: The John Hopkins Center for Civil Society Studies.

Salamon, L. M. and W. Sokolowski. 2001. "Volunteering in Cross-National Perspective: evidence from 24 countries." *Working Papers of the John Hopkins Comparative Nonprofit Sector Project*. pp. 1-23. Baltimore: The John Hopkins Center for Civil Society Studies.

Salamon, L. M., W. Sokolowski, and H. Anheier. 2000. "Social Origins of Civil Society: an overview". *Working Papers of the Johns Hopkins Comparative Nonprofit Sector Project*. pp. 1-22. Baltimore: The John Hopkins Center for Civil Society Studies.

Saunders, P. 1993. "Citizenship in a Liberal Society." In *Citizenship and Social Theory*, edited by B. S. Turner, pp. 57-90. London: Sage Publications Ltd.

Saxon-Harrold, S. K. and J. Kendall. 1993. "Researching the Voluntary Sector". Tonbridge: Charities Aid Foundation.

Scanlon, C. 2001. "A Step to the Left? Or Just a Jump to the Right? Making sense of the third way on government and governance." *Australian Journal of Political Science* 36(3):481-98.

Scott, D. W. and L. Russell. 2001. "Contracting: The experience of service delivery agencies." In *Voluntary Organisations and Social Policy in Britain*, edited by M. Harris and C. Rochester, pp. 49-63. Hounsmills: Palgrave.

Scott, J. C. 1985. *Weapons of the Weak: everyday forms of peasant resistance*. New Haven: Yale University Press.

Seligman, A. B. 1993. "The Fragile Ethical Vision of Civil Society." In *Citizenship and Social Theory*, edited by B. S. Turner, pp. 137-61. London: Sage Publications Ltd.

Sharp, B. 1989. "Volunteerism: a practice in decline." *Emergency*(November):48.

Sheard, J. 1995. "From Lady Bountiful to Active Citizen." In *An Introduction to the Voluntary Sector*, edited by J. Davis Smith, C. Rochester, and R. Hedley, London: Routledge.



- Shucksmith, M. 2000. "Endogenous Development, Social Capital and Social Inclusion: perspectives from LEADER in the UK." *Sociological Ruralis* 40(2):208-18.
- Silverman, D. 2001. "The Construction of 'Delicate' Objects in Counselling." In *Discourse Theory and Practice: a reader*, edited by M. Wetherall, S. Taylor, and S. Yates, pp. 119-37. London: Sage Publications.
- Skocpol, T. 2004. "The Narrowing of Civic Life" [accessed on 12th September, 2004]. Available at:  
[www.prospect.org/web/page.wv?section=root&name=ViewPrint&articleid=7749](http://www.prospect.org/web/page.wv?section=root&name=ViewPrint&articleid=7749)  
 .
- Smith, A. 1984. *The Theory of Moral Sentiments*. Indianapolis: Liberty Fund Smith.
- Smith, D. H. 1981. "Altruism, Volunteers, and Volunteerism." *Journal of Voluntary Action Research* 10:21-36.
- Smith, D. H. 1994. "Determinants of Voluntary Association Participation and Volunteering: a literature review." *Nonprofit and Voluntary Sector Quarterly* 23(3):243-63.
- Smith, D. H. 1997. "Grassroots Associations Are Important: some theory and a review of the impact literature." *Nonprofit and Voluntary Sector Quarterly* 26(3):269-306.
- Snooks, H., N. Kearsley, J. Dale, M. Halter, J. Redhead, and W. Y. Cheung. 2004. "Towards Primary Care for Non-serious 999 Callers: results of a controlled study of "Treat and Refer" protocols for ambulance crews." *Quality & Safety in Health Care* 13(6):435-43.
- Snooks, H. A., N. Kearsley, J. Dale, M. Halter, J. Redhead, and J. Foster. 2005. "Gaps Between Policy, Protocols and Practice: a qualitative study of the views and practice of emergency ambulance staff concerning the care of patients with non-urgent needs." *Quality & Safety in Health Care* 14(4):251-57.
- Sobus, M. S. 1995. "Mandating Community Service: psychological implications of requiring prosocial behaviour." *Law and Psychology Review* 19:153-82.
- Sommerfeld, D. and M. Reisch. 2003. "Unintended Consequences: the impact of welfare reform in the United States on NGOs." *Voluntas: International Journal of Voluntary and Nonprofit Organizations* 14(3):299-320.
- Spaite, D., R. Maio, H. Garrison, J. Desmond, M. Gregor, I. Steill, C. Cayten, J. Chew, E. MacKenzie, D. Miller, and P. O'Malley. 1999. "Emergency Medical Services Outcomes Project (EMSOP) II: developing the foundation and

conceptual models for out-of-hospital outcomes research.” *Annals of Emergency Medicine* 37(6):657-63.

St John New Zealand. 2006. "Ambulance Services" [accessed on 12th June, 2006]. Available at: <http://www.stjohn.org.nz/products/ambulance.aspx>.

Stebbins, R. A. 1996. "Volunteering: a serious leisure perspective." *Nonprofit and Voluntary Sector Quarterly* 25:211-24.

Steiner, S. 1997. "Care on a shoestring - Volunteer retention emergency services." *JEMS*(January):78.

Stone, R. Year. "Training for a Safer Community: volunteer development within the Australian Quality Training Framework." In *Value Your Volunteers or Lose Them - A Summit* edited by, pp. 1-11. Canberra:Emergency Management Australia.

Stone, W. and J. Hughes. 2002. "Social Capital: empirical meaning and measurement validity" [accessed on 26th September, 2002]. Available at: URL: <http://www.aifs.gov.au/>.

Strasser, P. R. 2002. "Preparation for Rural Practice." In *The New Rural Health*, edited by D. Wilkinson and I. Blue, pp. 12-43. Melbourne, Australia: Oxford University Press.

Stretton, H. and L. Orchard. 1994. Public Goods, Public Enterprise, Public Choice Theoretical Foundations of the Contemporary Attack on Government. Houndmills: The Macmillan Press Ltd.

Sveningsson, S. and M. Alvesson. 2003. "Managing Managerial Identities: organizational fragmentation, discourse and identity struggle." *Human Relations* 56(10):1163-93.

Swan, T. 1991a. "Great Expectations: What do EMS volunteers want from management?" *Journal of Emergency Medical Services*(February):47.

Swan, T. 1991b. "No-cost benefits and incentives." *Emergency*(August):21.

Swerissen, H. and S. Duckett. 1997. "Health Policy and Financing." In *Health Policy in Australia*, edited by H. Gardener, Singapore: Oxford University Press.

Tajfel, H. 1978. Differentiation between Social Groups: studies in the social psychology of intergroup relations. London: Academic Press.

Tajfel, H. 1982. Social Identity and Intergroup Relations. Cambridge: Cambridge University Press.

- Tajfel, H. and J. Turner. 1986. "The Social Identity Theory of Intergroup Behaviour." In *Psychology of Intergroup Relations*, edited by S. Worchel and W. G. Austin, Chicago: Nelson.
- Tannen, D. 2001. "The Relativity of Linguistic Strategies: rethinking power and solidarity in gender and dominance." In *Discourse Theory and Practice: a reader*, edited by M. Wetherall, S. Taylor, and S. Yates, pp. 150-66. London: Sage Publications.
- Taylor, R. F. 2004. "Extending Conceptual Boundaries: work, voluntary work and employment." *Work Employment Society* 18(1):29-49.
- Tennant, M. 2001. "Governments and Voluntary Sector Welfare: historians' perspectives." *Social Policy Journal of New Zealand*(17):147-60.
- Thomson, P. 2005. "Bringing Bourdieu to Policy Sociology: codification, misrecognition and exchange value in the UK context." *Journal of Education Policy* 20(6):741-58.
- Tilly, C. and C. Tilly. 1998. *Work Under Capitalism*. Colorado: Westview Press.
- Tippett, V., S. Woods, G. Fitzgerald, and M. Clark. 2003. "Towards a National Research Agenda for the Ambulance and Pre-hospital Sector in Australia." *Journal of Emergency Primary Health Care* 1(1).
- Titmuss, R. 1971. *The Gift Relationship*. London: Allen and Unwin.
- Tschirhart, M., D. J. Mesch, J. L. Perry, T. K. Miller, and G. Lee. 2001. "Stipended Volunteers: their goals, experiences, satisfaction, and likelihood of future service." *Nonprofit and Voluntary Sector Quarterly* 30(3):422-43.
- Tsoukas, H. 2000. "What is Management?" In *Realist Perspectives on Management and Organisations*, edited by S. Ackroyd and S. Fleetwood, pp. 205 19. London: Routledge.
- Turner, B. 2001. "The Erosion of Citizenship." *The British Journal of Sociology* 52(2):189-209.
- Turner, Q. Year. "Payments to Volunteers Will Destroy the Fabric of Volunteerism." In *10th National Conference on Volunteering: evolution, devolution, or revolution* edited by, pp.:Volunteering Australia.
- Van Til, J. 1985. "'Mixed Motives': residues of altruism in an age of narcissism." In *Motivating Volunteers: how the rewards of unpaid work can meet people's needs*, edited by L. F. Moore, Vancouver: The Volunteer Centre.

Vandenberghe, F. 2000. "'The Real is Relational': an epistemological analysis of Pierre Bourdieu's generative structuralism." In *Pierre Bourdieu*, edited by D. Robbins pp. 381-427. London: Sage Publications.

Verba, S., K. Schlozman, and H. Brady. 1995. *Voice and Equality: civic voluntarism in American politics*. Cambridge: Harvard University Press.

Volunteer Ambulance Officers Association of Tasmanian. 2000. "About volunteers" [accessed on August 10th, 2000]. Available at: <http://www.TASED.EDU.AU/tasonline/tasvolam/training.htm>.

Volunteering Australia. 2006. "National Survey of Volunteering Issues". Melbourne: Volunteering Australia.

Wakeman, J. and S. Lenthall. 2002. "Remote Health." In *The New Rural Health*, edited by D. Wilkinson and I. Blue, pp. 12-43. Melbourne, Australia: Oxford University Press.

Walzer, M. 1995. "The Civil Society Argument." In *Theorizing Citizenship*, edited by R. Beiner, pp. 153-74. New York: State University of New York Press.

Warburton, J. 2004. "Marginalizing Australia's Volunteers: the need for socially inclusive practices in the non-profit sector." *Australian Journal of Volunteering* 9(1):33-40.

Warburton, J. and C. MacDonald. 2002. "'Compulsory Volunteering' Under Mutual Obligation Policies: implications for the future." *Just Policy* 26:11-17.

Warburton, J. and A. Mutch. 2000. "Volunteer Resources: will people continue to volunteer in the next century?" In *Volunteers and Volunteering*, edited by J. Warburton and M. Oppenheimer, pp. 32-43. Sydney: The Federation Press.

Warburton, J. and M. Oppenheimer. 2000. "Volunteers and Volunteering". Sydney: The Federation Press.

Warburton, J. and J. Smith. 2003. "Out of the Generosity of Your Heart: are we creating active citizens through compulsory volunteer programmes for young people in Australia?" *Social Policy & Administration* 37(7):772-86.

Warburton, J. and D. J. Terry. 2000. "Volunteer Decision Making by Older People: a test of a revised theory of planned behaviour." *Basic and Applied Psychology* 22(3):245-57.

Ware, A. 1989. *Between Profit and State: Intermediate organizations in Britain and the United States*. Princeton: Princeton University Press.

Waring, M. 1988. *Counting for Nothing : what men value & what women are worth*. Wellington, N.Z.: Allen & Unwin.

Weber, M. 1978. *Economy and Society: an outline of interpretive sociology*. Berkley California: University of California Press.

Weisbrod, B. A. 1988. *The Nonprofit Economy*. Cambridge: Harvard University Press.

Wetherall, M. 2001. "Debates in Discourse Research." In *Discourse Theory and Practice: a reader*, edited by M. Wetherall, S. Taylor, and S. Yates, pp. 380-99. London: Sage Publications.

Wetherall, M., S. Taylor, and S. Yates. 2001. "Introduction." In *Discourse Theory and Practice: a reader*, edited by M. Wetherall, S. Taylor, and S. Yates, pp. 380 99. London: Sage Publications.

Whittaker, A. and C. Banwell. 2002. "Positioning Policy: the epistemology of social capital and its application in applied rural research in Australia." *Human Organization* 61(3):252-61.

Wilensky, H. 1975. *The Welfare State and Equality*. Berkeley: University of California Press.

Wilkinson, J. and M. Bittman. 2002. "Volunteering: the human face of democracy". Sydney: Social Policy Research Centre.

Willis, E. and L. McCarthy. 1986. "From First-Aid to Paramedical Ambulance Officers in the Health Divisions of Labour." *Community health Studies* 10(1):57 67.

Willmott, R. 2000. "Structure, Culture and Agency: rejecting the current orthodoxy of organisation theory." In *Realist Perspectives on Management and Organisations* edited by S. Ackroyd and S. Fleetwood, pp. 205-19. London: Routledge.

Wilson, C. 2001. "The Changing Face of Social Service Volunteering: a literature review". Ministry of Social Development.

Wilson, C., A. Kerslake Hendricks, R. Smithies, Knowledge Management Group, and M. o. S. Development. 2001. "'Lady Bountiful' and the 'Virtual Volunteers': the changing face of social service volunteering." *Social Policy Journal of New Zealand*(17):124-46.

Wilson, J. and M. Musick. 1997. "Who cares? Towards an integrated theory of volunteer work." *American Sociological Review* 62(5):694-713.

Wilson, J. and M. Musick. 1999. "The Effects of Volunteering on the Volunteer." *Law and Contemporary Problems* 62(4):141-68.

Winter, I. 2000. "Social Capital and Public Policy in Context." In *Social Capital and Public Policy in Australia.*, edited by I. Winter, Melbourne: Australian Institute of Family Studies.

Wiseman, J. 2006. "Local Heroes? Learning from Recent Community Strengthening Initiatives in Victoria." *Australian Journal of Public Administration* 65(2):95-107.

Wolfberg, D. 1998. "The truth about volunteer incentives: The pros and cons of administering an EMS volunteer program." *JEMS*(August):46-51.

Wollebaek, D. and P. Selle. 2002. "Does Participation in Voluntary Associations Contribute to Social Capital? The impact of intensity, scope and type." *Nonprofit and Voluntary Sector Quarterly* 31(1):32-61.

World Bank. 1999. "Poverty Net: Social Capital for Development" [accessed on August 19th, 1999]. Available at: [www.worldbank.org/poverty/acaptial/index.htm](http://www.worldbank.org/poverty/acaptial/index.htm).

Wuthnow, R. 1987. *Meaning and Moral Order*. Berkeley: University of California Press.

Wuthnow, R. 1998. *Loose Connections: joining together in America's fragmented communities*. Cambridge, Mass: Harvard University Press.

Yeung, A. B. 2004. "The Octagon Model of Volunteer Motivation: results of a phenomenological analysis." *Voluntas: International Journal of Voluntary and Nonprofit Organizations* 15(1):21-46.

Yin, R. K. 1994. *Case Study Research: design and methods*. Thousand Oaks: Sage Publications.

Young, I. M. 1990. *Justice and the Politics of Difference*. Princeton: Princeton University Press.

Zappala, G. and T. Burrell. 2001. "Why Are Some Volunteers More Committed than Others? A socio-psychological approach to volunteer commitment in community services." Camperdown: The Smith Family.

Zappala, G. and T. Burrell. 2002. "What Makes a Frequent Volunteer? Predicting volunteer commitment in a community services organisation." *Australian Journal on Volunteering* 7(2):47-58.

Zappala, G., B. Parker, and V. Green. 2001. "The 'New Face' of Volunteering in Social Enterprises: the Smith Family experience". The Smith Family.

# Appendices

## Appendix A - Sample Information Sheet

**Project: Volunteers in the Health and Emergency Services**

**Investigator**

Ms Christine Fahey, Researcher, University Department of Rural Health, Tasmania

**What is the Purpose of the Study?**

The “Review of an Organisational Response to Volunteer Research” project is being undertaken as a collaboration between [name]Ambulance Service and the University Department of Rural Health, Tasmania (UDRH). The study will capture details of the changes that have been occurring within your organisation in response to the volunteer research information obtained in 2002. The project will not only describe the changes, but will look for how these have affected volunteers and paid staff and whether they have changed the ability of your organisation to recruit and retain volunteers. The information will also be used to contribute to a thesis on volunteer governance being undertaken by Christine Fahey.

**Who is being asked to participate?**

I am asking volunteers, rural paid ambulance staff, committee members, members of the organisation’s volunteer management groups and members of the organisations management to participate in interviews.

**What will be the benefit of participating?**

Your participation will help increase understanding about how management structures and decision within your organisation affect volunteers. By understanding how the work on the volunteer plan have changed the experience for volunteers, your organisation is better able to respond to volunteers and employees.

**What will be discussed?**

The discussion will cover:

- 1 Your understanding of the changes that have occurred.
- 2 How changes have affected your ability to involved in decision making within the organisational structure
- 3 How changes have impacted on volunteers and paid staff within the organisation overall.



**How will the interview be run?**

A contact person will invite selected individuals to participate. Selection will be made on the basis of wanting to talk to certain groups of individuals, and convenience, where some groups may be coming together for a meeting or event and will therefore be more accessible. If you indicate you agree to an interview, instructions for the time and location will be provided to you. This research involves interviews, each interview expected to last for thirty to sixty minutes. The discussions will be tape recorded and transcribed later. The interviews will be conducted in a place that is most convenient to the participants.

**Will there be any risk or discomfort and will my comments be anonymous?**

I do not anticipate that there will be any risk above the everyday norm for persons participating in this research project. However, I acknowledge that you are members of a small community and that confidentiality and anonymity is very important to protect you and other members participating in the interview from any social harm, embarrassment or legal implications.

**Will people know what I have said?**

Your information will be collected by Christine Fahey from the University of Tasmania who will ensure that you are not identified when reporting the data. Once the taped interviews have been typed up and you have agreed that the information is correct, the information will be used in a report for your organisation. Your name and title will not be used, and any information that you gave that could only be known by you will be disguised, so that you cannot be recognised by the report. The data will be kept in a locked cabinet at the University of Tasmania for at least five years and then destroyed by shredding.

**Can I withdraw if I want to?**

Participation in this research is voluntary. You are free to withdraw from the research at any time without prejudice. To withdraw, simply inform the researcher. Before the interview, you will be asked to give your informed consent to participate and to sign the attached form. If you agree, that will be taken as your consent by demonstrating your willingness to participate.

**When will the report be available?**

A report will be available by February 2005 and will be made available to you by your organisation. Christine's doctoral thesis is expected to be completed by mid 2006 and your organisation will be informed of this.

**Who can I contact if I have further questions?**

For further information about the project please contact Christine Fahey, UDRH, (telephone 03 6226 4754) or by email at [Christine.Fahey@utas.edu.au](mailto:Christine.Fahey@utas.edu.au)

If you have any concerns or complaints about the manner in which the project interviews are conducted please contact the Chair or Executive of the Northern Tasmania Social Research Ethics Committee

Chair Professor Roger Fay 03 6324 3576 Executive Officer Mrs

Amanda McAully 6226 2763. Thank you very much for your

interest in this important project.

## Appendix B: Sample Consent Form

### Statement of informed consent for the research project – Volunteers in the Health and Emergency Services

1. I have read and understood the 'Information Sheet' for this study.
2. The nature and possible effects of the study have been explained to me.
3. I understand that I have been asked to participate in a thirty minute interview with Christine Fahey from the University of Tasmania. We will talk about volunteers within the Ambulance Service and the changes resulting from the organisations volunteer plan. I understand that the information to be collected will involve:
  - Answering questions about my understanding of the changes that have occurred in the organisation.
  - Answering questions about how changes have affected my ability to be involved in decision making within the organisational structure.
  - Answering questions about how changes have impacted on volunteers and paid staff within the organisation overall.

After the interview I will be able to make changes or withdraw anything that I have changed my mind about.

- 1 I understand that there are no foreseeable risks involved.
- 2 I understand that all research data will be securely stored on the University of Tasmania premises until no longer required, at which time it will be destroyed.
- 3 Any questions that I have asked have been answered to my satisfaction.
- 4 I agree that research data gathered for the study may be published (provided that I cannot be identified as a participant).
- 5 I understand that my identity will be kept confidential and that any information I supply to the researcher will be used only for the purposes of the research and will not be made available to the Ambulance Service in a format that would identify me.
- 6 I agree to participate in this investigation and understand that I may withdraw at any time without any effect, and if I so wish, may request that any personal data gathered be withdrawn from the research.

Name of participant: .....

Signature of participant:..... Date: .....

I have explained this project and the implications of participation in it to this participant and I believe that the consent is informed and that he/she understands the implications of participation.

Name of  
investigator:.....

Signature of investigator: ..... Date: .....

## Appendix C – Politicians speeches sample

Those speeches selected for in-depth analysis are underlined.

### **1. Prime Minister of Australia John Howard speeches mentioning community, volunteer or volunteer organisation in title = 53**

Available on <http://www.pm.gov.au/media/>

Address to the Tumby Bay Community Morning Tea, Tumby Bay Community Hall, South Australia, 03 August 2005

Address to the Whyalla Community Afternoon Tea, Whyalla Football Clubrooms, Whyalla, 03 August 2005

Transcript of the Prime Minister The Hon John Howard MP: Address at the Prime Minister's Awards for Excellence in Community Business Partnerships, Melbourne Museum, Melbourne, 20 October 2005

Transcript of the Prime Minister The Hon John Howard MP: 'Change the World for Ten Bucks' book launch, Victorian Red Cross Headquarters, North Melbourne, 19 October 2005

Transcript of the Prime Minister The Hon John Howard MP: Official Opening of the Mission Australia Centre, Surry Hills, Sydney, 26 September 2005

Address to Community Morning Tea, Longford RSL, Tasmania, 01 September 2005

Address to Community Afternoon Tea, Playford Civic Centre, South Australia, 25 August 2005

Announcement of National Community Crime Prevention Programme, Blacktown, Sydney, 22 August 2005

Address to Bonner Electorate Community Tea, Carindale, Brisbane, 18 May 2005

Address to the Calamvale Community College, Calamvale, Brisbane, 17 May 2005

Address to the Timber Communities, Australian National Convention, Country Club Resort, Launceston, 14 May 2005

Address to Braddon Community Afternoon Tea, LaTrobe, Tasmania, 13 May 2005

Tasmanian Community Forest Agreement, Styx Valley, Tasmania, 13 May 2005

Address to Community Barbeque, Wadeye, Northern Territory, 06 April 2005

Address at Community Morning Tea, Joondalup Civic Centre, Perth, 15 December 2004 Hobart Business Community Drinks, Tasmania, 27 August 2004 Address at the Community Morning Tea, Townsville, Queensland, 02 August 2004 Address to Community Morning Tea, Midland Town Hall, Perth, 29 July 2004 Address at Petrie Community Lunch, Southern Cross Catholic College, Caboolture, 21 July 2004

Address at Community Morning Tea, Boronia RSL Club, Victoria, 16 July 2004

Address at McMillan Community Morning Tea, Community Church Warragul, Victoria, 15 July 2004

Address at Hindmarsh Community Morning Tea, West Lakes, Adelaide, 07 July 2004

Address at Solomon Community Morning Tea, Kalymnian Hall, Darwin, 19 July 2004

Community Afternoon Tea, Launceston, Tasmania, 28 June 2004

Address to Community Morning Tea, Parramatta RSL Club , 28 May 2004

Address at Community Morning Tea, Colac Otways Performing Arts & Cultural Centre, Colac, Victoria, 20 April 2004

Address at Fundraising Lunch, for Gippsland Cancer Care Unit, Traralgon, Victoria, 19 April 2004

Address at Community Morning Tea and Citizen of the Year, Paterson, New South Wales, 16 April 2004

Launch of the Wesley Mission's Easter Launch, Wesley Mission Centre, Sydney, 08 April 2004

Stronger Families and Communities Announcement, The Infant's Home, Ashfield, 07 April 2004

Opening and Closing Remarks at Mackay Community Sugar Meeting, Mackay, Queensland, 06 March 2004

Address to Community Afternoon Tea, Narre Warren North Public Hall, Victoria, 24 February 2004

Address to Community Morning Tea, Whitehorse Club, East Burwood, 24 February 2004

Address at Leongatha Community Morning Tea, Leongatha Town Hall, Leongatha, Victoria, 23 February 2004

Address to Community Morning Tea, Launceston Tram Shed, Inveresk, Launceston, 13 February 2004

Address to Community Afternoon Tea, Gunnedah, New South Wales - 27 November 2002

Address to the Community Afternoon Tea, Ipswich, Queensland - 5 September 2002

Address to Community Morning Tea, Wagga Wagga - 9 May 2002

Address at the Mission Australia, Winter Homeless Appeal Launch, Brisbane, Queensland, 09 April 2003

Announcement of the Winner of the National, Emergency Services Memorial Design, Mural Hall, Parliament House, 20 March 2003

Address at Volunteer Awards Ceremony Cronulla Leagues Club, Sydney - 14 August 2001 Keynote Address to the Mission Australia National Conference 'A Stronger More Cohesive Society' Canberra, ACT - 6 August 2001 Address to ACOSS Congress, Melbourne - 25 October 2001 Address to Petrie Community Function Brisbane - 11 October 2001 Address to Community Morning Tea, Wantirna, Melbourne - 9 October 2001 Address at Community Morning Tea Ocean Grove, Victoria - 6 September 2001 Address to Community Function, St Mary's College, Seymour. - 6 September 2001 Speech at Community Morning Tea Whitehorse Club, Burwood, Victoria - 4 September 2001 Address at the Launch of the Smith Family in Western Australia - 12 April 2001 Address at the Chinese New Year Banquet, Australian Chinese Community Association of New South Wales, Sydney - 3 February 2001 Address at McEwen Community Breakfast - 2 February 2001 Address at Community Luncheon, Lakes Entrance - 1 February 2001

**2. The Honourable Peter Costello MP, Treasurer of the Commonwealth of Australia - speeches mentioning community, volunteer or volunteer organisation in title = 5**

Available at <http://www.treasurer.gov.au/tsr/listdocs.asp?doctype=1>

Launch of Melbourne 2006 Commonwealth Games Volunteer Programme – 28<sup>th</sup> January 2005 Address to Communities in Control Conference – 8<sup>th</sup> June 2004 Address to Anglicare Lunch - "Is Faith a Lost Cause" – 27<sup>th</sup> June 2003 The Salvation Army Red Shield Appeal Launch – 16<sup>th</sup> april 2002 Inaugural Sir Henry Bolte Lecture - "The Spirit of the Volunteer" – 15<sup>th</sup> August 2001

**3. Prime Minister of New Zealand Helen Clark speeches mentioning community, volunteer or volunteer organisation in title = 2**

Available <http://www.beehive.govt.nz/Minister>

Safer Communities Policy 11<sup>th</sup> August 2005 [Address to the North Shore](#)

[Rotary Club 50<sup>th</sup> Jubilee Dinner – 8<sup>th</sup> October 2003](#)



## Appendix D - Sample of data analysis

*Anonymous volunteer:* Training is a big issue for me. What is offered at local station level is catering for induction level. My skills and competency are never checked, but I am the highest qualified in all my shifts. This for me is an issue – one of safety. Something needs to be put in place for annual reassessments.

*Theme:* The volunteer in this excerpt is calling up the issue of safety, by implication the patient's safety, and links it to the lack of training and assessment. The author argues for increased assessments.

*Modality:* The words *This for me* demonstrates subjective modality and low affinity which suggests that this is not a strong discourse within the organisation, and/or that the author does not feel they can speak on behalf of others with confidence. The low affinity is likely to express a lack of power, rather than a lack of conviction or lack of knowledge as there is no evidence of hedging or uncertainty in the text piece. The author is quite direct. There is no doubt that the author is the person making the claims that the local station is not offering a high enough level of training, nor is it checking competency.

*Genre chain:* Blunt and direct speech/writing was a feature of the survey responses and is likely to be linked to the anonymity provided by the survey. Respondents did not need to fear repercussions and could therefore speak actively to foreground their claims.

*Intertextuality:* While patients are not mentioned in this passage the implication that there is a problem with safety requires the interpreter to make the link between inadequate training and skill checks, along with lack of more senior personnel, to see that the patient safety is the concern.

## Appendix E: Additional data excerpts for Chapter Six

### Altruism and Frugality

*Leroy –Manager:* If I spend \$3,500 on a Christmas show, when I divide it up it's probably \$100 a head; it's nothing in the big picture. So – but I know that some teams make their spouses pay for the Christmas shows. It's crazy. It just goes against the grain. I just – that just goes against my grain.

*Leroy –Manager:* Oh, look, the organisation has had a culture of – Ambulance culture (inaudible)... but as far as volunteers are concerned they just need to value them. They just need to say thank you. It's not that hard, for crying out loud, and – but as an organisation there are a lot of places that are struggling to do that, you know, and I know over the three regions how they're treated a little bit differently and I'll spend, spend, spend, spend, where some managers won't allow money to be spent this freely but I would just, "Let's do it." Stop talking and start doing – that's my theory, and it's not that hard, so

*Carmen Volunteer Manager:* As long as someone's not out of pocket I think to do the job I think they're pretty happy. I know since the GST has come in everything through Finance has got more – it seems to be picky. You know, you just can't have like a coke and a meal – there's some sort of event we go to sometimes, like as a standby and stuff – you've got to have your receipts for everything and put your receipts in and even at your Christmas party you've got to have everybody's names as well as their – to say there's, you know, 20 people here that doesn't work any more; you've got to actually name the people and – oh, it's really getting picky. But I suppose that's Finance, isn't it?

### Structurally embedding under-resourcing

*Anna – New Manager* ...but if [the service] isn't prepared to put some resources and funding into the volunteer support services type field, well then we're going to lose a lot more volunteers because they're not going to see anything happen for a while now because we're still chasing our tails from last year and trying to

finish some of the other stuff and more and more work keeps coming in every day so it's an interesting time.

*George - Manager:* There's a lot of assumptions being made, but also they may get some more but it might have to be strategically lined up with the start of the new financial year or we may have to go and seek some support from Government because currently the Government doesn't really give us much support for our volunteers; it's all money back to them from money generated from their work, and so we have to have a look at whether all the programs we've got running and the building programs and everything else, whether we can actually wear an increase in any reimbursements and stuff like that for volunteers or whether we now have to go and get smarter and look at grants or support from the Government to actually support what they're saying and having more – keeping in mind that we don't want to get away from the philosophy of volunteering - and in my view we're walking a really fine line here in some things which are clinically seen as reimbursements for some could be seen as wage earning by default.

Now we're getting to the implementation stage there's actually quite a bit of resistance to that crew going there now from the volunteers even though I've tried to assure them that, you know, they're not going to be pinching their emergency work but when I'm digging I think I'm actually finding that the reasons were that their expectations were that they were actually going to be the people that were employed.

*Greg New Manager:* I think so. I think so, and as we get better data to look at as well because we know that, you know, some of the communities on a daily basis we don't have a crew and so just purely for our business sense we have to look at that risk and that it's only going to be – we're only going to be able to look at that for so long before we actually will have to do something to look at addressing that but in any of the suggestions that I've made there are going to be significant financial implications and when it comes to money that's – you know, it's going to be a long process

*Reg- manager* ...particularly from an administrative point of view, you would go through the processes of administration and then you'd send them in to what was HR thinking it had been logged etcetera, nothing actually happened with it, in fact a lot of files seemed to have disappeared or were never recorded.

### **Rural/urban dualism**

*Leroy Traditional Manager:* So the way people operate. The ethos is different. I believe if you're working in [the city], making decisions for people in the country, you need to understand that ethos and you need to be a face and you need to be out there and I think that's something that the organisation, from an education point of view, you know, have people involved making educational decision; for people in the country they haven't actually been out in the country and I think that's something that we as an organisation need to battle with because I think those people need to have a good understanding of what country people do. I've got 30 plus people here. I would know – I wouldn't say I know them all intimately – but I would know something reasonably personally about most of them, you know, family, what they do for a job. I know quite a bit about them and sort of you're on the ground, you're at the face, so I have a good understanding – I've lived in the country all my life – so I have a good understanding for that country perspective and quite often I find myself, you know, people in town making decisions and I'm saying, "No, you can't do that," and I'll stick up for the country and I stick up for my vollies.

*George - Manager:* Well, it's not going to go down very well. My view has always been and was re-enhanced by the conference I went to in Melbourne, which you were also at, and that is that the closer you get to a metropolitan area the expectations of what volunteers get increase. So the more remote volunteers really don't care that much and also they probably don't have to drive that far to go to their ambulance station and all that sort of stuff or they could stay home, where closer to metropolitan area people are doing lots of work. They sometimes don't live in the town so they drive to the town to do a shift for the day, and they carry with them their expectations from the jobs that they would do during the day, being usually industrialised, trades and stuff like that, so they bring the

expectations of payments for mileage and all that sort of stuff with them. So you're managing, in my view you're managing urban, rural and remote volunteers

– you're managing them differently and each group has a different expectations, so you get a bit of a clash then when they're all together with some saying, "No, we don't want this," and some, "Yes, we do."

*Carmen Volunteer Manager:* As long as the numbers can be kept up I can't see that – they can't get too low because in a lot of the smaller towns you could never get paid staff there because it's just not viable and if they didn't have volunteers in most of the smaller towns they wouldn't have an ambulance and that would be it.

*Canon Traditional Manager:* my volunteers, in particular, are very pragmatic people that basically come from farming, rural backgrounds and they're not interested in anything at all other than turning up for training, manning their rosters and looking after their communities. They're not interested in volunteer for anything other than the ambulance, basically.

### **Blocked Communication channels**

*Anna – New Manager:* Yeah.....Because they're talking about it and they're sprouting that they're working on all these projects and they're doing all these things for volunteers, they really need to walk the talk.

*Leroy- Traditional Manager:.* I think people in town are deaf. I think people in town need to understand volunteers. They need to understand the country people. They need to understand that they have a life, you know. They need to understand, you know, I've got people here that work 50, 60 hours a week, okay? They don't understand that. They keep feeding them with – bombarding them with stuff. They get bombarded with this, bombarded with administrative stuff, bombarded with faxes, and they haven't got time and people need to understand that, and they don't, and you know - you try and try and try and try, but people – they need to go and sit on a bulldozer with one of my guys and see what he does for a job and then for his enjoyment he's a volunteer ambulance officer.

*George – Manager:* We could communicate a lot better to our volunteer workforce about where projects are and what the expectations of the organisation are, you know, that we are only doing a review and it could go this way and it could go that way, and just sort of probably being a bit more transparent about the process so that people understand that it is a process and it's not over-promised, under-delivered stuff.

CS: Yes.

*George - Manager:* It seems to be, you know, I don't know whether we do that deliberately, but that's sort of seen how it comes across to the volunteers that we've promised we'll do this review and we're going to get more but, you know, then it's not delivered. So we've got to try and stamp that out somehow.

*Sophie – New manager:* No, well they can't....it's so slow, the system is. Most of them say that they can't get on to the /internet it's so complex and so time consuming and it's so damn slow when they do do it, you know, they're not going to sit there and wait for twenty or thirty minutes for the thing to download. You know, and there's one computer on station,...and then....we complain that they're not reading the stuff. Well, give us a break!!

### **Lack of collective voice**

*Leroy - Manager.* volunteers are underrated by the community. I think that's one of the things I'm going to take on next. It's underrated, it's undervalued. I've said it for years and I'll keep on saying it, the ambulance volunteers do more, their commitment – they do more than any other voluntary organisation you can tell me in [this state], if not Australia. Now, the commitment, what's required, is more and it's huge – than the Red Cross, CWA, the Footy Club. It's absolutely huge, so – and it certainly needs to be recognised ..... by the local town, by the local government and the organisation itself and I think that people (inaudible) they deserve to (inaudible)

*Leroy - Manager..* There's so many teams screaming for volunteers that – and we're not doing anything about it and I think – so we're doing lots of other things, but that one –

*George - Manager:* I guess the one that's probably topical at the moment is we're through a process of we've opened up a review on volunteer entitlements ... we've invited comment from team leaders, managers, anybody who wanted to either put in a written submission or by telephone link-up put in their feelings about volunteer entitlements, what they get, what they don't get, how much they get, whether it's appropriate, etc., etc. ... but because the process has probably taken six months to do that properly, the review and the consultation, the expectations from the volunteers who've participated in that, and obviously consequently talked to their team mates about that as something that's going to happen and, "We're going to get significantly more than we get now," and managing that expectation has been quite difficult.

*Carmen Volunteer Manager:* Huge posters but they're a complete waste of money. Just a waste of space, yeah. I don't know what else the changes are really. I know they're trying to – but they seem to be driven by one department either decides that they want to make a bigger impact, more people turn up, they decide what they want to try and do with them, and do this, do that.

### **Structurally embedding cultural inequities**

*Anna – New Manager:* Yeah, they were, they came under organisational development, they weren't even part of HR....One person had started on the road as a training person and talked to the stations and management about HR issues and helped them create some systems out there, realised there was a need, came in here and started doing some work to build that, build on that and develop some systems within [the organisation] for assisting and providing an HR service to the stations. So...and then I'm imagining that she's requested a staff member. I saw some papers where she'd put up some requests for a staff member outlining some of the work that needed to happen, which is when she got the assistant role but then I imagine she was just overwhelmed, absolutely overwhelmed.

*Sophie – New Manager:* We already ask an enormous lot of our volunteers, this has to be the most demanding role of a volunteer ever managed and asked for, and we expect the same from them as we do from our other ambulance offices, and we'll you just have to think about Christmas and the road trauma they're going to see on the Highway as volunteers to think, 'God, you know, that's enormous, that's really huge'. Then you think of the domestic violence that's going to occur over the holidays, the child abuse, I mean, it's just, they're at the front line of the worst of our society and we're not putting the resources into them.

*Reg - Manager:* Oh well there's a few reasons, one is that it's been identified that the volunteer system and the volunteers are the number one risk to our operation, so they had to address that by improving services and support for the volunteers. So I guess that's probably the main driver.....When I say the number 1 risk, the ambulance service and the government, I believe, can't afford to put on more paid staff throughout the country areas and hence they are completely reliant on the volunteer system, so because of the issues of recruitment and retention, they really had to focus on that and actually improve things to try and get more volunteers in and once they were in, to try and keep them. I think that's still a challenge which they haven't fully mastered yet, but they're definitely working on it.

### **The inequity risks of a discourse of community participation**

Interviewer CS: There's a bit of talk too about more community engagement. What do you think that means or entails?

*Carmen Volunteer Manager:* It's another jargon buzz word I think. I don't know – I'm still a bit confused about what community can actually do? I mean, you – the people in the community who want to be ambulance officers are or will be, or are you talking about more of a primary health thing like preventing having to use an ambulance rather than just using it? But I think there's only so far you can go.

*Canon - Manager:* I'm sure we are moving away from a mindset where we just tell them what they need and what level they'll get to, determining community by



community what those actual needs are, and then a collaborative approach to actually achieving it, but there's going to be no simple answer to a declining rural population I mean if there are no people in the community to volunteer then there's no volunteers. I'm not sure what you do about that, other than perhaps pull the resources that you've got and have, for example, in a really small remote area, rather than have a volunteer ambulance officer and a volunteer fireman and a volunteer rescue person, perhaps they could be all the same person. You know and have a multi-skilled response within the community, things like that. Make more use of first responders, rather than the full-blown ambulance system have a first response system and then back it up with a neighboring resource, but again that depends on the community itself.

*Anna – New Manager:* Yeah, the problem they've got is that they keep relying, I think, too heavily on the volunteers to be involved and I think they should be involved from a consultative point of view but not actually be expected to complete the workload. And so what they're doing is developing these teams and I think they've got ten people but five of them may be volunteers who can't actually do anything other than provide input at that session, and so you may be left with two people who can actually do the work and it's just not enough. And the people that they do pull into the projects are people that don't want to be involved in that project because they've got so many other things on the go. I think everyone's overworked and kind of struggling at the moment. So they're not going to get the quality that they need or the.....they really need to get out there with a big oomph to kind of emphasise that how important this all is to the organisation.